

What Consumers Say About the Quality of Their Health Plans and Medical Care

**National CAHPS®
Benchmarking Database**

2006 CAHPS® Health Plan Survey Chartbook

September 2006

2006 CAHPS[®] Health Plan Survey Chartbook

*What Consumers Say About Their Experiences with Their
Health Plans and Medical Care*

September 2006

This Chartbook is a publication of the National CAHPS[®] Benchmarking Database (the CAHPS Database). The CAHPS Database is funded by the U.S. Agency for Healthcare Research and Quality and administered by Westat and Shaller Consulting under Contract Number 290-01-0003.

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Introduction

The *2006 CAHPS Health Plan Survey Chartbook* presents summary-level results for the CAHPS Health Plan Survey 3.0 for the years 2005 and 2006. This Chartbook also presents selected historical data for the 6 year period from 2001 through 2006.

These results were drawn from the National CAHPS Benchmarking Database (the CAHPS Database), the national repository for data from the CAHPS family of surveys. Since its inception in 1998, this database has served as an important resource for survey sponsors, researchers, and others interested in using comparative CAHPS survey results and detailed benchmark data.

The *CAHPS Health Plan Survey Chartbook* is published annually to provide survey sponsors and others with the most recent national Health Plan Survey results available. National results for other CAHPS surveys, such as the Hospital Survey, are compiled and published in separate chartbooks as they become available.

The data presented in this Chartbook include 2005 and 2006 results for the following populations:

- Commercial Adult
- Medicaid Adult
- Medicaid Child
- State Children's Health Insurance Program (SCHIP) (2006 only)
- Medicare Managed Care

The CAHPS Database is funded by the Agency for Healthcare Research and Quality (AHRQ) and administered by Westat and Shaller Consulting through the CAHPS User Network. An advisory group composed of representatives of survey sponsors and other interested organizations provides oversight and direction for the database.

All sponsors of CAHPS surveys that are administered independently according to CAHPS survey specifications are welcome to participate in the CAHPS Database.¹ Health Plan Survey sponsors submitting data to the CAHPS Database receive a customized report that compares their own results to appropriate national and regional benchmarks. Researchers may gain authorized access to research files from the CAHPS Database by submitting an application to a special research committee of the database advisory group.

Further information about the CAHPS Database is available at https://www.cahps.ahrq.gov/content/ncbd/ncbd_Intro.asp?p=105&s=5.

¹ CAHPS surveys that have not been administered according to CAHPS specifications are evaluated for comparability before data are reported in the Chartbook or included in the CAHPS Database research files.

Key Findings: 2005-2006

The bar charts in this report present CAHPS Health Plan Survey 3.0 results for 2005 and 2006 in the commercial, Medicaid, SCHIP, and Medicare Managed Care sectors. Because the data sources for the two years are not exactly the same (see Data Sources and Comparison Limitations, page 9), the results for 2005 and 2006 are not directly comparable. However, they are presented together in this report to enable readers to easily view the results of both years.

Overall survey results continue to remain largely consistent with those of previous years, reflecting an overall stability in consumer assessments of their health care. Key findings include:

- ***As in previous years, the majority of survey respondents rate their medical care providers and overall health care highly.*** Well over 50 percent of all respondents across all sectors rated their personal doctors and specialists either “9” or “10” on a 10-point scale where “0” is the worst possible and “10” is the best possible. Over half of all respondents also rated their overall health care highly.
- ***In general, respondents rate their health plans lower than they rate their personal doctors and specialists.*** Lower ratings for health plans are especially notable among commercial sector respondents. The exception is among SCHIP enrollees, who gave their health plans the same or higher ratings than their medical care providers in 2006. As noted below, health plan ratings also increased slightly across all sectors between 2005 and 2006, and most notably among Medicare plan enrollees.
- ***Respondents across all sectors showed either no change or a slight increase in both their ratings and their reports of their experiences between 2005 and 2006.*** The only exception to this overall steady state or increase was in Medicare enrollee reports on the quality of health plan Customer Service, which declined from 2005 levels.
- ***Respondents across all sectors report the most positive experiences for questions related to “getting needed care.”*** For example, 84% of Medicare enrollees in 2006 report “not a problem” to questions about access to needed care. In contrast, questions related to “getting care quickly” receive the least positive responses; only 58% of Medicare enrollees in 2005 and 2006 report “not a problem” to these questions.
- ***Parents responding about their children in the Medicaid sector uniformly report more positive experiences than adults responding about their own care.*** Parent ratings are also higher than adult ratings of care among Medicaid enrollees. Insufficient survey data were collected to report results for the Child Commercial population in 2005 and 2006.

Selected Historical Data: 2001-2006

As noted in the previous section, year-to-year comparisons of CAHPS Health Plan Survey results are complicated due to annual changes in the composition of the database and to minor differences in survey versions for some years (for example, the transition from CAHPS 2.0 to 3.0). However, keeping these limitations in mind, it is reasonable to consider overall historical patterns in CAHPS Health Plan Survey results, and to observe some general trends.

The tables below show the “top line” results (i.e., the most positive survey response categories) by sector for the CAHPS Health Plan Survey Adult and Child composites and ratings for the years 2001-2006. An N/A indicates that less than 10 health plan samples were submitted to the CAHPS Database and therefore were not sufficient to report results. Detailed information on the composition of the CAHPS Health Plan Survey database for these years is presented in Appendix C.

Table 1: Survey Results by Sector – Adult Survey, 2001-2006

| Composite or Rating | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 |
|---|------|------|------|------|------|------|
| Getting Needed Care (% not a problem) | | | | | | |
| Medicare | 85 | 83 | 80 | 81 | 83 | 84 |
| Medicaid | 72 | 74 | 67 | 64 | 66 | 67 |
| Commercial | 78 | 79 | 74 | 75 | 76 | 76 |
| Getting Care Quickly (% always) | | | | | | |
| Medicare | 59 | 59 | 55 | 57 | 58 | 58 |
| Medicaid | 46 | 47 | 44 | 42 | 45 | 45 |
| Commercial | 47 | 46 | 45 | 46 | 46 | 46 |
| Doctors Who Communicate Well (% always) | | | | | | |
| Medicare | 69 | 68 | 68 | 68 | 68 | 71 |
| Medicaid | 61 | 62 | 60 | 58 | 62 | 62 |
| Commercial | 60 | 58 | 58 | 59 | 61 | 61 |
| Courteous and Helpful Office Staff (% always) | | | | | | |
| Medicare | 79 | 79 | 78 | 78 | 79 | 79 |
| Medicaid | 67 | 67 | 66 | 63 | 67 | 67 |
| Commercial | 66 | 64 | 64 | 65 | 66 | 66 |
| Customer Service (% not a problem) | | | | | | |
| Medicare | 68 | 67 | 72 | 73 | 73 | 65 |
| Medicaid | 63 | 64 | 67 | 68 | 70 | 69 |
| Commercial | 58 | 59 | 64 | 64 | 65 | 64 |
| Overall Rating of Health Plan (% responding 9 or 10) | | | | | | |
| Medicare | 60 | 61 | 59 | 52 | 56 | 60 |
| Medicaid | 50 | 52 | 50 | 50 | 51 | 53 |
| Commercial | 40 | 41 | 41 | 41 | 42 | 43 |

Table 2: Survey Results by Sector - Child Survey, 2001-2006

| Composite or Rating | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 |
|---|-------------|-------------|-------------|-------------|-------------|-------------|
| Getting Needed Care (% not a problem) | | | | | | |
| SCHIP | N/A | 82 | 83 | 73 | N/A | 78 |
| Medicaid | 73 | 81 | 77 | 70 | 71 | 74 |
| Commercial | 84 | 88 | N/A | 78 | N/A | N/A |
| Getting Care Quickly (% always) | | | | | | |
| SCHIP | N/A | 47 | 50 | 43 | N/A | 57 |
| Medicaid | 54 | 56 | 55 | 49 | 56 | 57 |
| Commercial | 59 | 58 | N/A | 55 | N/A | N/A |
| Doctors Who Communicate well (% always) | | | | | | |
| SCHIP | N/A | 61 | 58 | 58 | N/A | 70 |
| Medicaid | 65 | 68 | 71 | 64 | 70 | 71 |
| Commercial | 69 | 69 | N/A | 69 | N/A | N/A |
| Courteous and Helpful Office Staff (% always) | | | | | | |
| SCHIP | N/A | 62 | 59 | 59 | N/A | 73 |
| Medicaid | 68 | 72 | 74 | 66 | 73 | 74 |
| Commercial | 74 | 73 | N/A | 71 | N/A | N/A |
| Customer Service (% not a problem) | | | | | | |
| SCHIP | N/A | 74 | 73 | 77 | N/A | 77 |
| Medicaid | 62 | 67 | 74 | 74 | 75 | 75 |
| Commercial | 61 | 70 | N/A | 69 | N/A | N/A |
| Overall Rating of Health Plan (% responding 9 or 10) | | | | | | |
| SCHIP | N/A | 72 | 70 | 67 | N/A | 64 |
| Medicaid | 56 | 57 | 60 | 61 | 60 | 62 |
| Commercial | 47 | 51 | N/A | 50 | N/A | N/A |

One of the most prominent observations in these data is the remarkable consistency of scores over the 6 year period. As shown in the series of graphs on the following pages, scores for the Adult survey show few fluctuations from year to year, and the differences in scores between sectors remain consistent, with only a few exceptions.

The first exception is the slight decline in scores across all sectors in the Getting Needed Care and Getting Care Quickly composites between the years 2002 and 2003. One possible reason for this decline is the change in question wording related to these composites in the transition from CAHPS 2.0 to 3.0, which took place between 2002 and 2003.

Another exception is the overall slight increase in scores in the Customer Service composite. These scores increased by at least one percentage point in each year for both the Medicaid and Commercial sectors. Interestingly, Medicare scores for this composite fell slightly between 2001 and 2002, and fell again more dramatically between 2005 and 2006, to below the Medicaid score in 2006. It is possible that Medicare program changes during this period contributed to the decline in Customer Service scores.

Finally, there appears to be an overall rise in the Health Plan rating scores (percentage of respondents rating the plan 9 or 10 on a 0 to 10 scale) for the Medicaid and Commercial sectors. Again, however, the Medicare plan rating scores show a different pattern. The Medicare plan rating scores follow a slight decline between 2002 and 2004, falling to almost the Medicaid level in 2004 before rising again in 2005 and 2006.

Chart 1: Getting Needed Care Results by Sector – Adult Survey, 2001-2006

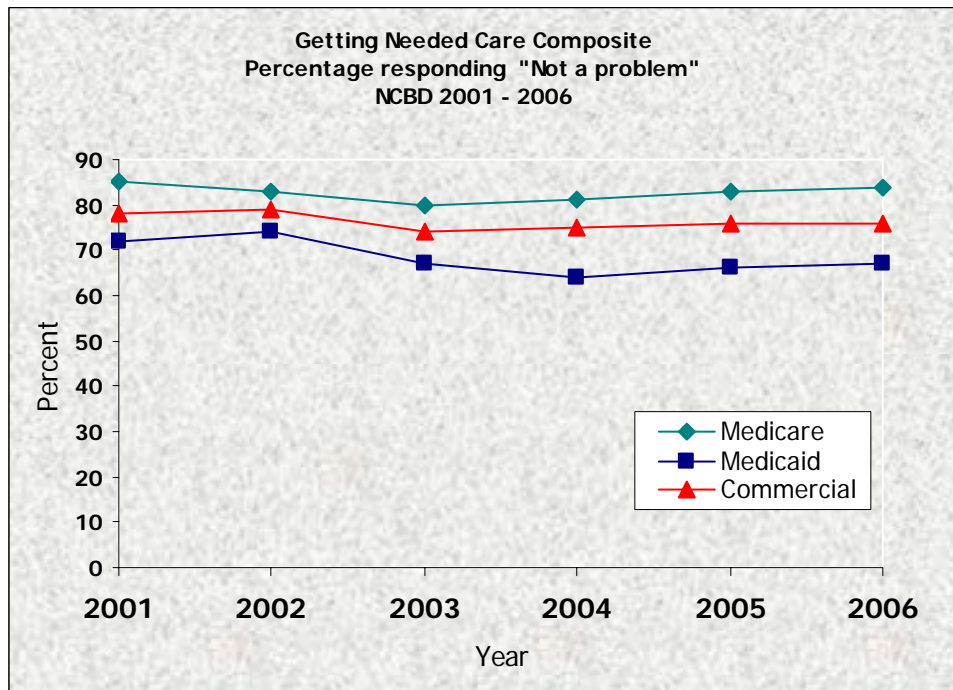


Chart 2: Getting Care Quickly Results by Sector – Adult Survey, 2001-2006

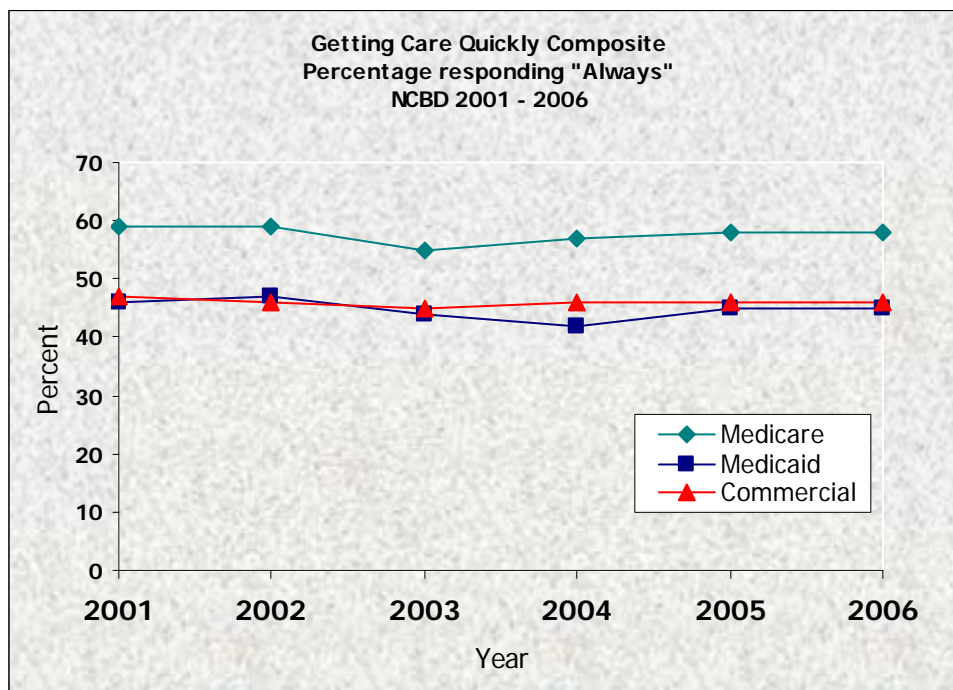


Chart 3: Doctors Who Communicate Well Results by Sector - Adult Survey, 2001-2006

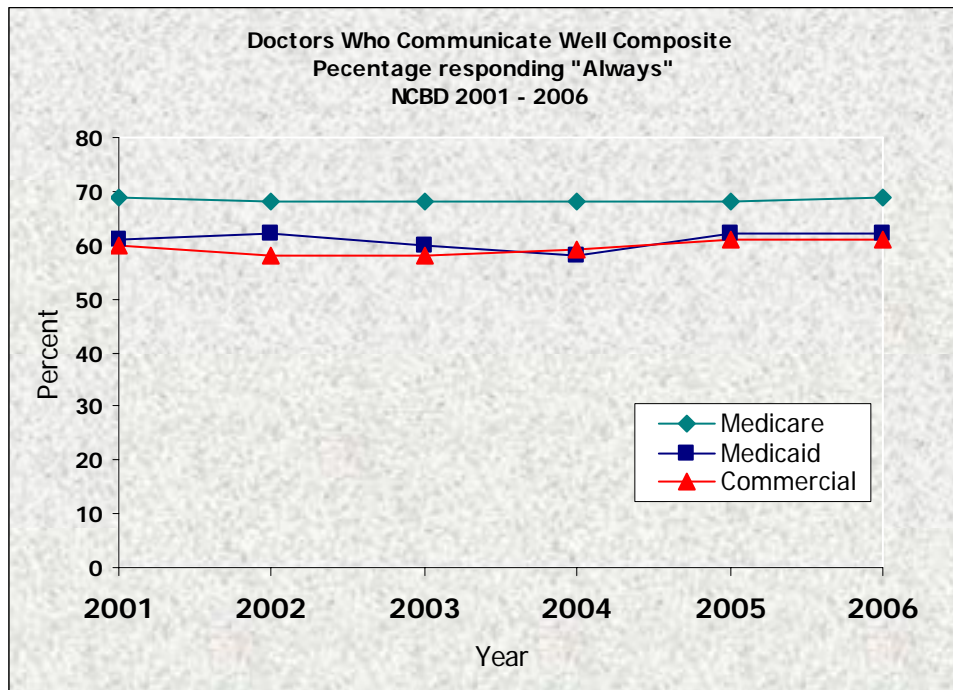


Chart 4: Courteous & Helpful Office Staff Results by Sector - Adult Survey, 2001-2006

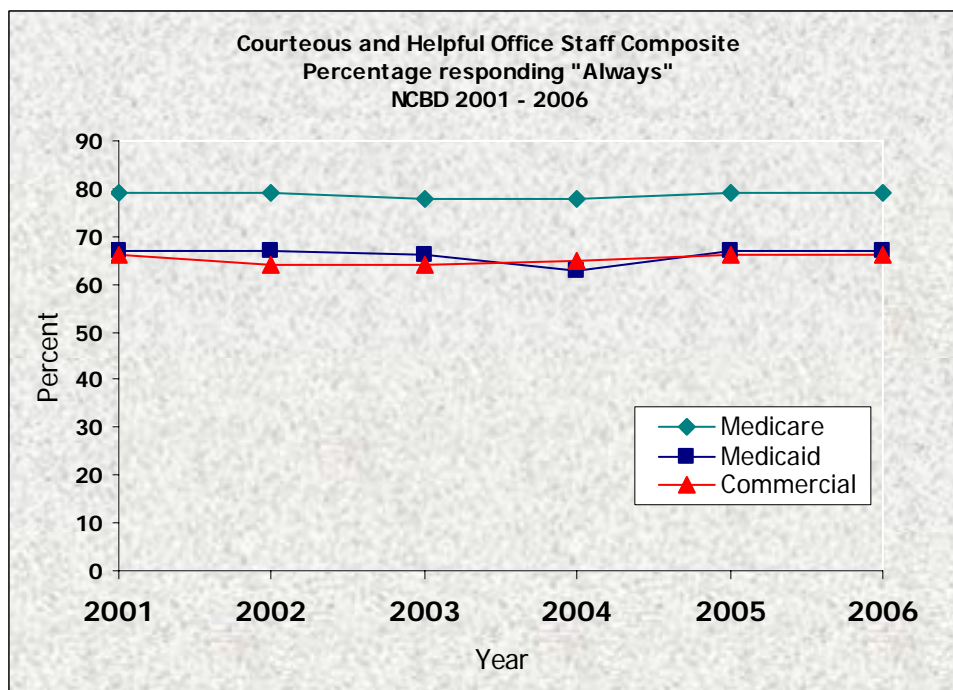


Chart 5: Customer Service Results by Sector – Adult Survey, 2001-2006

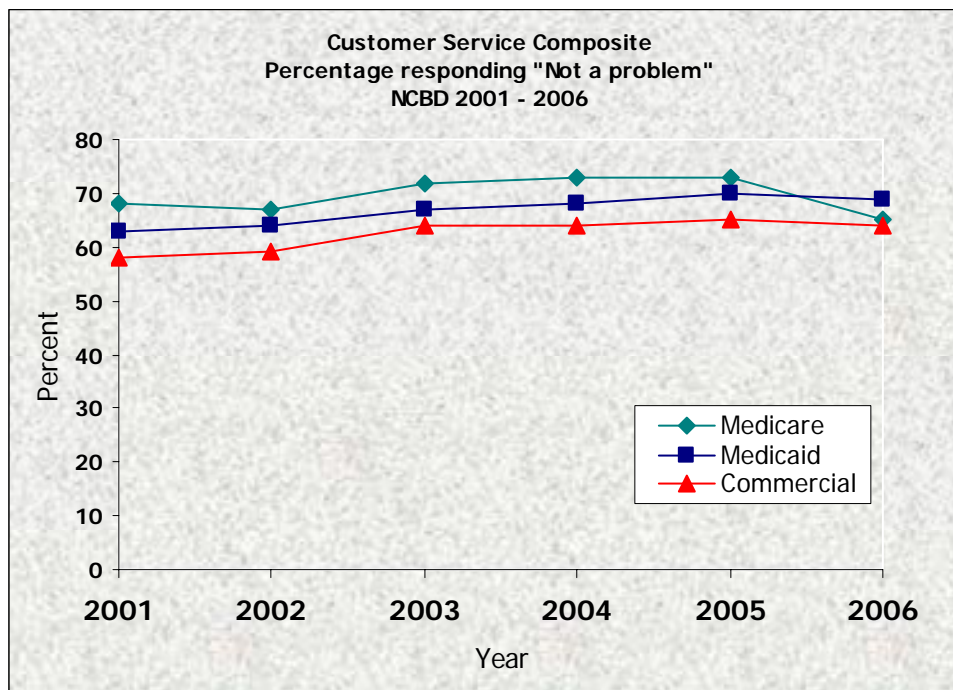
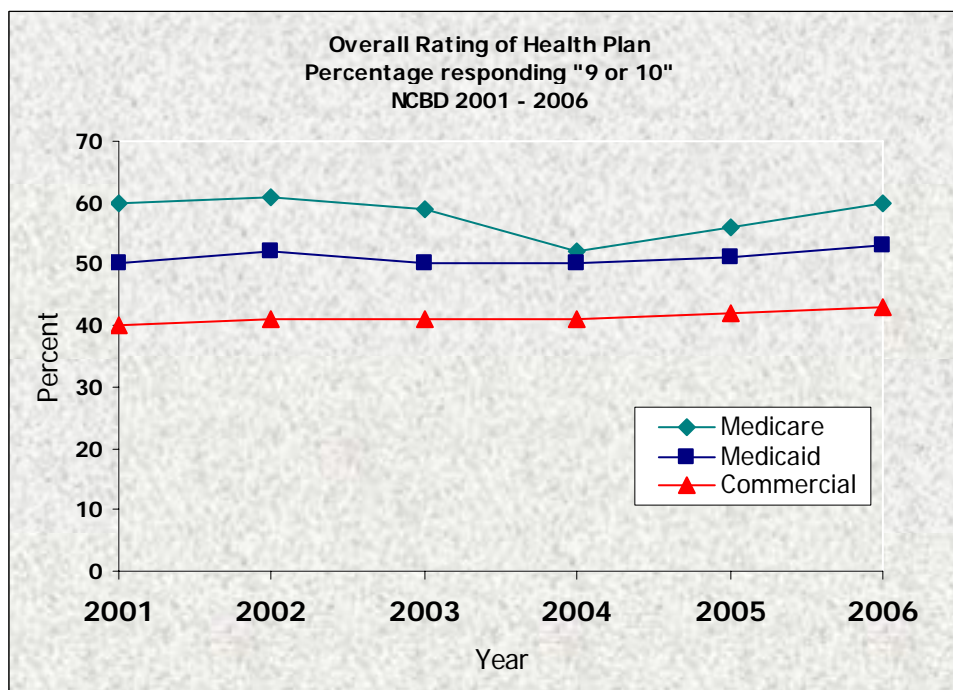


Chart 6: Overall Rating of Health Plan Results by Sector – Adult Survey, 2001-2006



Data Sources and Comparison Limitations

The data presented in this report were compiled from Health Plan Survey 3.0 results submitted to the CAHPS Database by various survey sponsors, including public and private employers, State Medicaid agencies, SCHIP programs, and individual health plans. The 2006 results are based on survey data collected between September 2005 and July 2006. The 2005 results are based on survey data collected between September 2004 and July 2005. Due to differences in the source of data submissions to the CAHPS Database from year to year, it is not possible to directly compare results for the two years.

The Medicare Managed Care Survey results originate from the Centers for Medicare & Medicaid Services' (CMS) annual survey of Medicare beneficiaries enrolled in managed care health plans. These 2005 results are from survey data collected from September 2004 through December 2005 while 2006 results are from survey data collected from January 2006 through April 2006. Readers should note that the Medicare results presented in this Chartbook may differ from other reports due to the inclusion or exclusion of special beneficiary sub-populations and/or the use of case-mix adjustment variables.

The following table presents the number of commercial, Medicaid, SCHIP, and Medicare survey respondents and health plan samples included in the CAHPS Database for 2006 and 2005. The number of health plan samples is indicated in parentheses.

Table 3. Number of Survey Respondents and Health Plan Samples: 2006 and 2005

| Year | Commercial | | Medicaid | | SCHIP | Medicare |
|------|---------------|-----------|--------------|-------------|------------|---------------|
| | Adult | Child | Adult | Child | Child | Adult |
| 2006 | 124,585 (271) | 2,400 (7) | 43,175 (119) | 50,204 (95) | 9,303 (30) | 97,955 (273) |
| 2005 | 123,272 (254) | 2,661 (4) | 32,115 (76) | 40,204 (65) | 1,252 (3) | 127,930 (276) |

Comparisons of the data submitted in each of the two years are noted below:

Commercial: The number of adult commercial submissions increased slightly between 2005 and 2006, with the majority (over 81,000 respondents) coming from health plans offered by the U.S. Office of Personnel Management (OPM), the Federal agency that sponsors health benefits for the civilian Federal government workforce. Other sources of commercial submissions include State employers, State health data commissions, and individual health plans. The number of child survey submissions in 2006 remained small, continuing the relatively low use of this survey in the commercial sector.

Medicaid: While the number of States submitting Medicaid data in 2006 (16) remained consistent with the number of States submitting in 2005 (15), there was a substantial increase in the number of plan samples and respondents for both adult and child populations. This increase is attributable largely to the submission of data in 2006 by large States such as New York that survey their program enrollees every other year.

SCHIP: Only three States (Kansas, New York, and Washington) submitted State Children's Health Insurance Program (SCHIP) data in 2006, with the vast majority of the data represented by 28 plans in New York.

Medicare: Each year, the CAHPS Database receives the complete data files for the CAHPS Medicare Managed Care survey sponsored by CMS. This survey includes all health plans with separate Medicare risk contracts in effect on or before July 1st of the preceding year. For 2006, 273 plan samples were selected from individual health plans. Although the number of plan samples for the Medicare Managed Care population remained relatively stable between 2005 and 2006, there was a sharp decline in the total number of survey respondents included in these samples. This decline likely occurred because the second survey mailing to non-respondents that had been used in previous administrations was excluded.

Tables 4 and 5 on the following two pages present the number of respondents and health plan samples in the CAHPS Database for 2006 and 2005 by State, including U.S. territories and the District of Columbia.

Table 4. 2006 Survey Respondents and Health Plan Samples by State

| State | Commercial | | Medicaid | | SCHIP | Medicare |
|-------------------|----------------------|------------------|---------------------|--------------------|-------------------|---------------------|
| | Adult | Child | Adult | Child | Child | Adult |
| Alabama | - | - | - | - | - | 1,382 (4) |
| Arizona | 2,792 (6) | - | - | - | - | 2,405 (7) |
| Arkansas | - | - | - | - | - | - |
| California | 8,358 (10) | - | 1,340 (3) | - | - | 15,576 (44) |
| Colorado | 3,297 (7) | - | 1,703 (4) | 2,143 (5) | - | 2,260 (6) |
| Connecticut | 1,903 (5) | - | 810 (2) | 555 (1) | - | 758 (2) |
| Delaware | 382 (1) | - | - | - | - | - |
| DC | 833 (2) | - | - | - | - | - |
| Florida | 9,252 (22) | - | 4,368 (13) | 4,179 (11) | - | 9,181 (27) |
| Georgia | 1,579 (4) | - | - | - | - | 382 (1) |
| Guam | 674 (2) | - | - | - | - | - |
| Hawaii | 1,207 (2) | - | 1,546 (3) | - | - | 1,047 (3) |
| Idaho | - | - | - | - | - | 752 (2) |
| Illinois | 5,412 (12) | - | - | - | - | 1,905 (5) |
| Indiana | 1,854 (4) | - | 348 (1) | 584 (1) | - | 1,635 (4) |
| Iowa | 1,937 (4) | - | - | - | - | 793 (2) |
| Kansas | 1,463 (3) | - | 1,054 (3) | 2,161 (2) | 1,595 (1) | 755 (2) |
| Kentucky | 849 (2) | - | - | - | - | 356 (1) |
| Louisiana | - | - | - | - | - | 149 (1) |
| Maine | 963 (2) | - | - | - | - | - |
| Maryland | 4,273 (9) | - | 3,050 (7) | 6,424 (7) | - | 1,158 (3) |
| Massachusetts | 5,334 (11) | - | 1,769 (6) | 2,271 (5) | - | 2,620 (7) |
| Michigan | 5,279 (12) | 558 (1) | 6,293 (15) | 2,143 (4) | - | 697 (2) |
| Minnesota | 675 (2) | - | 4,754 (9) | - | - | 2,186 (6) |
| Mississippi | - | - | - | - | - | - |
| Missouri | 3,133 (7) | - | - | 943 (2) | - | 3,848 (10) |
| Montana | 556 (1) | - | - | - | - | - |
| Nebraska | - | - | - | - | - | 798 (2) |
| Nevada | 729 (2) | - | - | - | - | 1,488 (4) |
| New Hampshire | 966 (2) | - | - | - | - | 392 (1) |
| New Jersey | 2,511 (7) | - | 313 (1) | - | - | 2,978 (8) |
| New Mexico | 1,704 (5) | - | 1,090 (3) | 2,072 (3) | - | 744 (2) |
| New York | 5,560 (12) | - | 6,535 (31) | 5,902 (29) | 7,062 (28) | 10,293 (30) |
| North Carolina | 388 (1) | - | - | - | - | 1,139 (3) |
| North Dakota | - | - | - | - | - | 418 (1) |
| Ohio | 5,852 (12) | - | 2,497 (5) | 5,117 (5) | - | 4,577 (14) |
| Oklahoma | 994 (2) | - | 357 (1) | - | - | 1,172 (3) |
| Oregon | 1,025 (2) | - | - | - | - | 3,388 (9) |
| Pennsylvania | 2,491 (6) | - | 3,091 (7) | 3,845 (7) | - | 8,067 (22) |
| Puerto Rico | 722 (2) | - | - | - | - | 1,099 (3) |
| Rhode Island | 851 (2) | - | 986 (2) | 612 (1) | - | 1,449 (4) |
| South Dakota | 444 (1) | - | - | - | - | - |
| Tennessee | 1,033 (3) | - | 479 (1) | 1,585 (1) | - | 1,417 (4) |
| Texas | 9,281 (23) | 296 (1) | - | - | - | 3,096 (9) |
| Utah | 821 (2) | 1,546 (5) | - | 2,422 (4) | - | - |
| Vermont | - | - | 414 (1) | - | - | - |
| Virginia | 2,069 (4) | - | 378 (1) | - | - | 383 (1) |
| Washington | 6,661 (13) | - | - | 7,246 (7) | 646 (1) | 1,837 (5) |
| West Virginia | - | - | - | - | - | 1,097 (3) |
| Wisconsin | 8,739 (23) | - | - | - | - | 2,278 (6) |
| Multi-State plans | 9,739 (17) | - | - | - | - | - |
| TOTAL | 124,585 (271) | 2,400 (7) | 43,175 (119) | 50,204 (95) | 9,303 (30) | 97,955 (273) |

Table 5. 2005 Survey Respondents and Health Plan Samples by State

| State | Commercial | | Medicaid | | SCHIP | Medicare |
|-------------------|----------------------|------------------|--------------------|--------------------|------------------|----------------------|
| | Adult | Child | Adult | Child | Child | Adult |
| Alabama | - | - | - | - | - | 1,799 (4) |
| Arizona | 2,726 (6) | - | - | - | - | 3,755 (8) |
| Arkansas | - | - | 533 (1) | 504 (1) | 631 (1) | - |
| California | 9,539 (10) | - | 861 (2) | - | - | 22,965 (49) |
| Colorado | 3,541 (7) | - | 1,384 (3) | 1,678 (3) | - | 4,238 (9) |
| Connecticut | 2,152 (5) | - | 791 (2) | 641 (1) | - | 1,385 (3) |
| Delaware | 451 (1) | - | - | - | - | - |
| DC | 975 (2) | - | - | - | - | 482 (1) |
| Florida | 3,869 (9) | - | 2,731 (11) | 2,305 (10) | - | 13,038 (29) |
| Georgia | 1,544 (4) | - | - | - | - | 451 (1) |
| Guam | 517 (1) | - | - | - | - | - |
| Hawaii | 1,391 (2) | - | - | 2,093 (3) | - | 1,385 (3) |
| Idaho | - | - | - | - | - | 924 (2) |
| Illinois | 4,434 (10) | - | - | - | - | 2,797 (6) |
| Indiana | 2,841 (6) | - | - | - | - | 1,412 (3) |
| Iowa | 1,559 (3) | - | - | - | - | 921 (2) |
| Kansas | 1,544 (4) | - | 857 (2) | 3,719 (3) | - | 949 (2) |
| Kentucky | 2,192 (5) | - | - | - | - | 450 (1) |
| Louisiana | 813 (2) | - | - | - | - | 1,410 (3) |
| Maine | 1,081 (2) | - | - | - | - | - |
| Maryland | 4,184 (9) | - | 2,638 (7) | 6,981 (7) | - | 989 (2) |
| Massachusetts | 5,787 (12) | - | - | - | - | 4,175 (9) |
| Michigan | 3,903 (8) | 623 (1) | 6,409 (15) | 7,162 (15) | - | 938 (2) |
| Minnesota | 528 (1) | - | - | - | - | 2,744 (6) |
| Mississippi | - | - | - | - | - | - |
| Missouri | 3,112 (7) | - | 374 (1) | 2,778 (6) | - | 2,867 (6) |
| Nebraska | 346 (1) | - | - | - | - | 477 (1) |
| Nevada | 836 (2) | - | - | - | - | 1,903 (4) |
| New Hampshire | 988 (2) | - | - | - | - | 472 (1) |
| New Jersey | 3,096 (7) | - | 416 (1) | - | - | 2,756 (6) |
| New Mexico | 2,111 (6) | - | 1,007 (3) | 2,363 (3) | - | 945 (2) |
| New York | 6,730 (13) | - | 948 (2) | - | - | 11,773 (27) |
| North Carolina | 744 (2) | - | 232 (1) | 250 (1) | - | 968 (2) |
| North Dakota | - | - | - | - | - | 478 (1) |
| Ohio | 5,966 (11) | - | 3,697 (6) | 7,021 (6) | - | 6,558 (14) |
| Oklahoma | 683 (2) | - | - | 358 (1) | - | 947 (2) |
| Oregon | 1,853 (3) | - | - | - | - | 6,085 (13) |
| Pennsylvania | 2,382 (5) | 1,221 (1) | 3,562 (7) | 1,743 (3) | - | 8,516 (18) |
| Puerto Rico | 741 (2) | - | - | - | - | 935 (2) |
| Rhode Island | - | - | 545 (1) | - | - | 1,353 (3) |
| South Dakota | 476 (1) | - | - | - | - | - |
| Tennessee | 1,542 (3) | - | 610 (1) | - | - | 1,407 (3) |
| Texas | 9,616 (22) | 319 (1) | - | - | - | 4,110 (9) |
| Utah | 2,618 (6) | 498 (1) | 1,131 (2) | - | - | - |
| Vermont | - | - | 390 (1) | - | - | - |
| Virginia | 2,094 (4) | - | 635 (2) | 608 (2) | 621 (2) | 944 (2) |
| Washington | 5,065 (9) | - | 2,364 (5) | - | - | 3,353 (7) |
| West Virginia | - | - | - | - | - | 916 (2) |
| Wisconsin | 9,277 (25) | - | - | - | - | 2,960 (6) |
| Multi-State plans | 357 (1) | - | - | - | - | - |
| TOTAL | 123,272 (254) | 2,661 (4) | 32,115 (76) | 40,204 (65) | 1,252 (3) | 127,930 (276) |

Results for Reporting Composites and Individual Items

Most of the CAHPS Health Plan Survey questions ask respondents to report on their experiences with various aspects of their care. Survey items that address the same aspect of care or service are combined into summary measures known as composites. The five composites drawn from the Health Plan Survey summarize enrollees' experiences in the following areas:

- Getting needed care
- Getting care quickly
- Doctors who communicate well
- Courteous and helpful office staff
- Health plan customer service

The questions that make up the "getting needed care" and "customer service" composites ask respondents to indicate how much of a problem the respondent has had with a certain aspect of care in the past 12 months (if commercial and Medicare plan enrollees) or 6 months (if Medicaid and SCHIP plan enrollees):

- "not a problem,"
- "a small problem," or
- "a big problem."

Results for these composites are reported as the percentage of respondents indicating "not a problem."

The questions that make up the other three composites ask respondents how often something has happened in the past 12 months (if commercial and Medicare plan enrollees) or 6 months (if Medicaid and SCHIP plan enrollees):

- "never,"
- "sometimes,"
- "usually," or
- "always."

Results for these composites are reported as the percentage of respondents indicating "always."

The following charts show the distribution of CAHPS survey scores for each of the five composite measures and the individual items that make up each of the composites.² A minimum number of 10 plan samples are required to generate results. An "NA" appears for the 2006 Child Commercial results because less than 10 plan samples were submitted to the CAHPS Database.

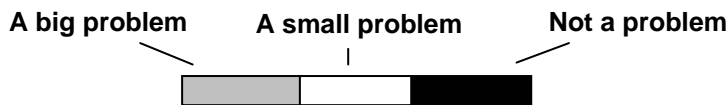
Supporting Information in the Appendix

Appendix D lays out the individual survey items and response options that make up each of the composites, as well as the wording and response options for each of the rating questions.

² The Medicare Managed Care Survey results presented in these charts may differ from other reports due to the inclusion or exclusion of special beneficiary sub-populations and/or the use of case-mix adjustment variables. These results, as well as those presented elsewhere, originate from the same source – CMS's annual survey of Medicare beneficiaries enrolled in managed care health plans.

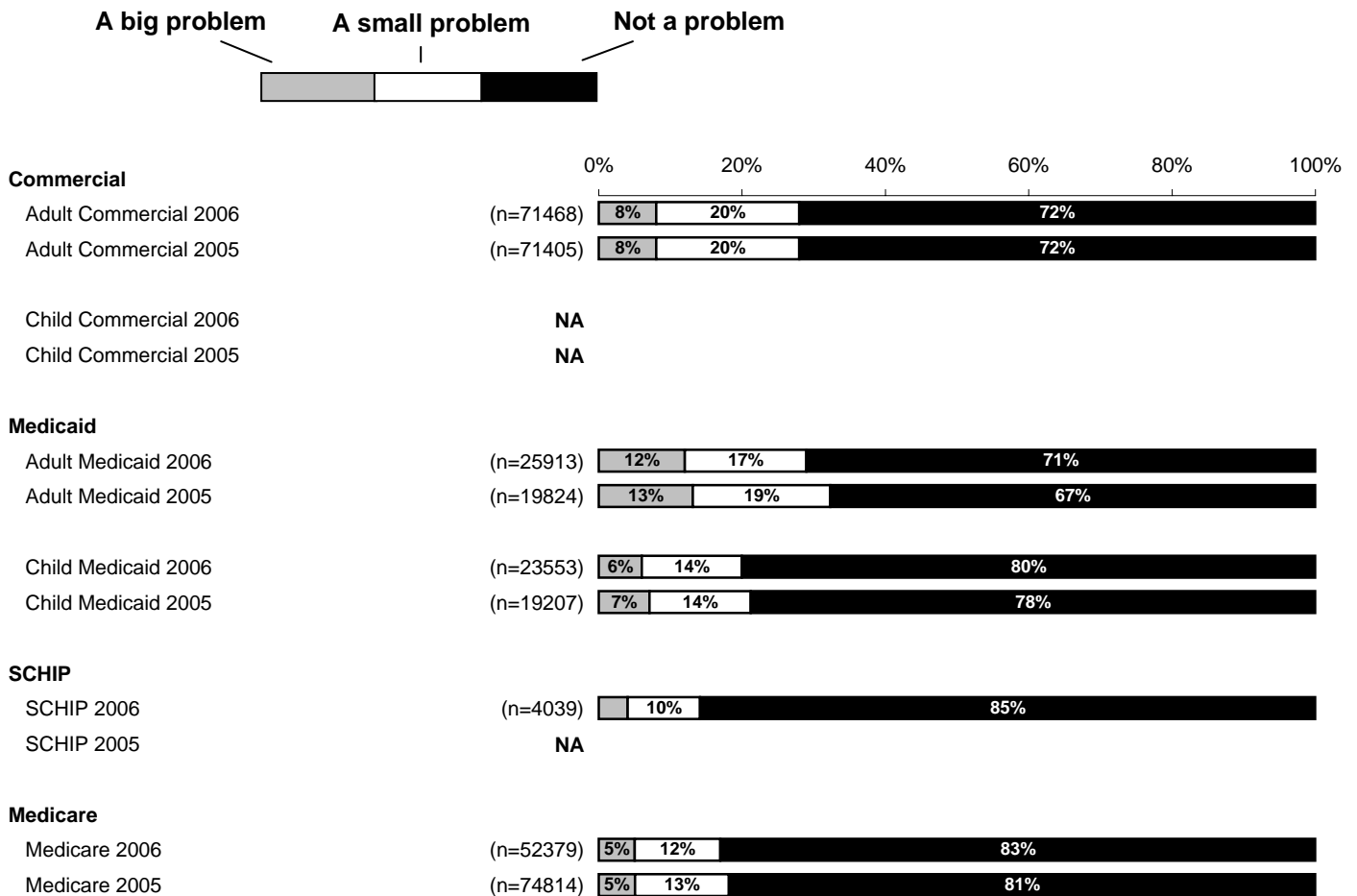
Getting Needed Care

Combines responses from four questions regarding how much of a problem, if any, consumers had with various aspects of getting needed care.



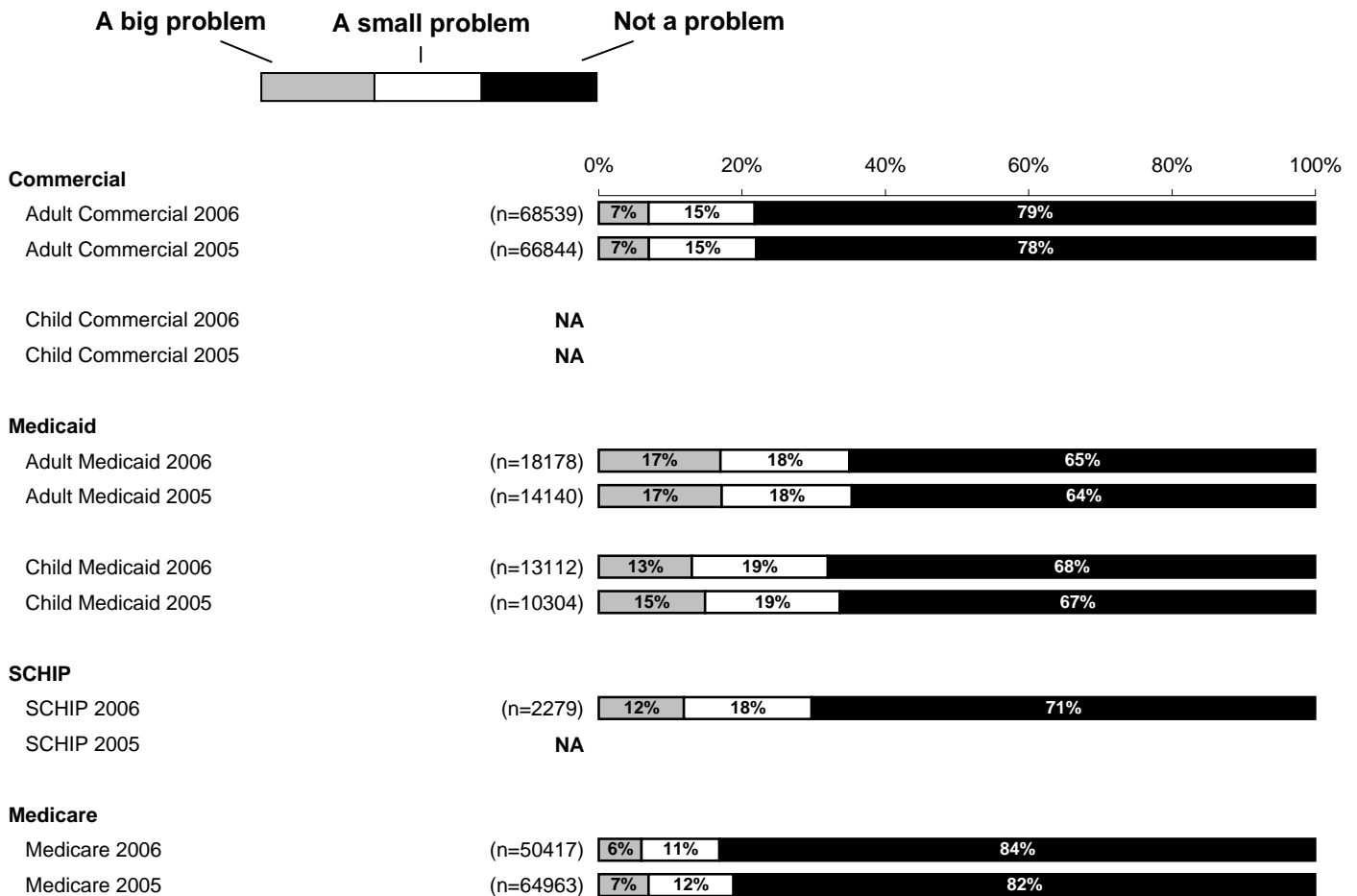
NOTE: Response distributions may not sum to 100 percent due to rounding.

How much of a problem, if any, consumers had with getting a personal doctor or nurse they were happy with.



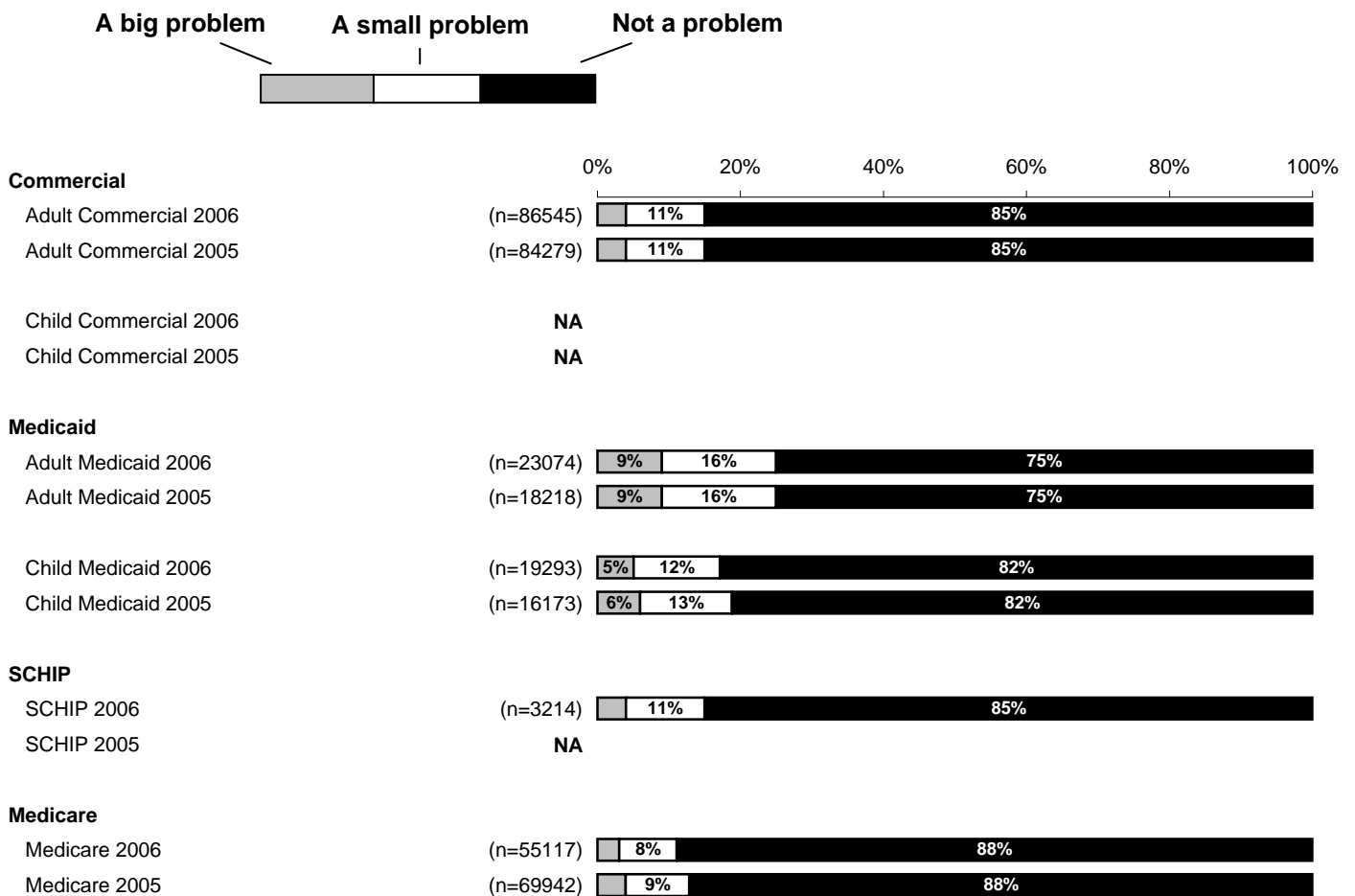
NOTE: Response distributions may not sum to 100 percent due to rounding.

How much of a problem, if any, consumers had with seeing a specialist they needed to see.



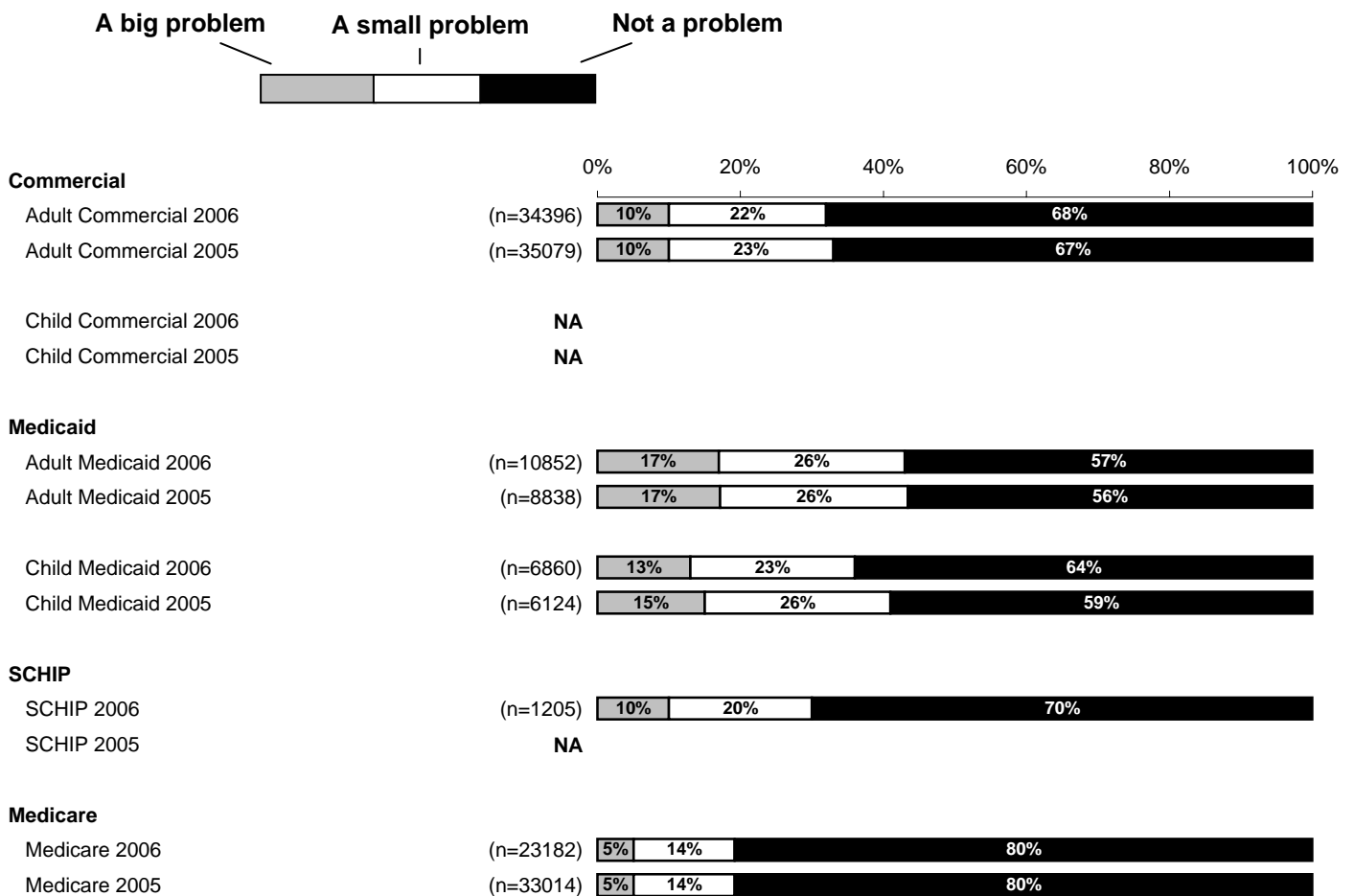
NOTE: Response distributions may not sum to 100 percent due to rounding.

How much of a problem, if any, consumers had with getting the care, tests, or treatment they or a doctor believed necessary.



NOTE: Response distributions may not sum to 100 percent due to rounding.

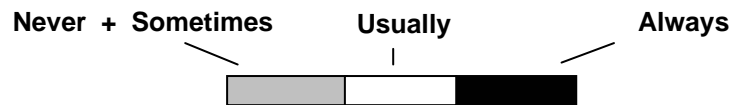
How much of a problem, if any, consumers had with delays in health care while they waited for approval from their health plan.



NOTE: Response distributions may not sum to 100 percent due to rounding.

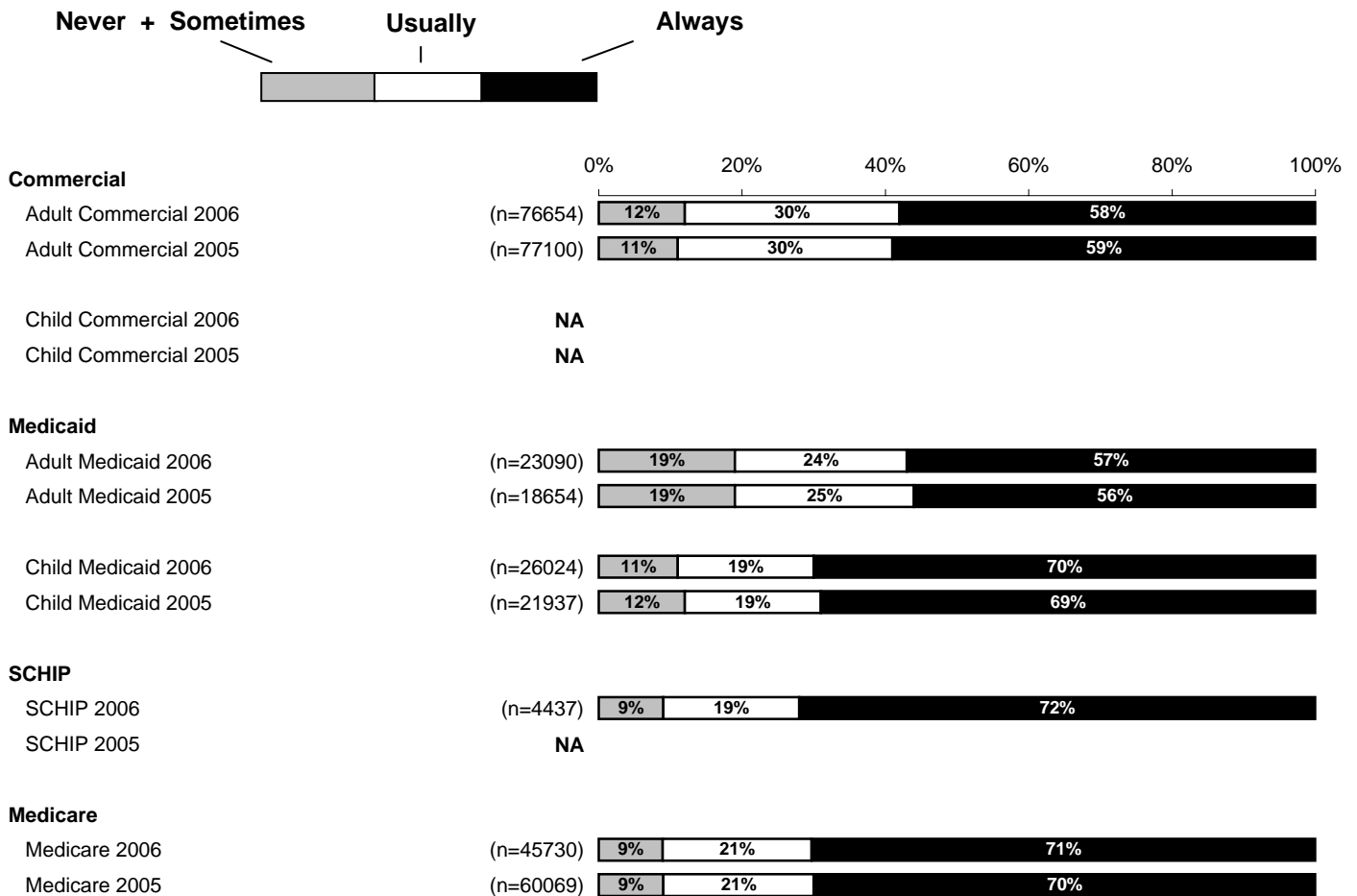
Getting Care Quickly

Combines responses from four questions regarding how often consumers received various types of care in a timely manner.



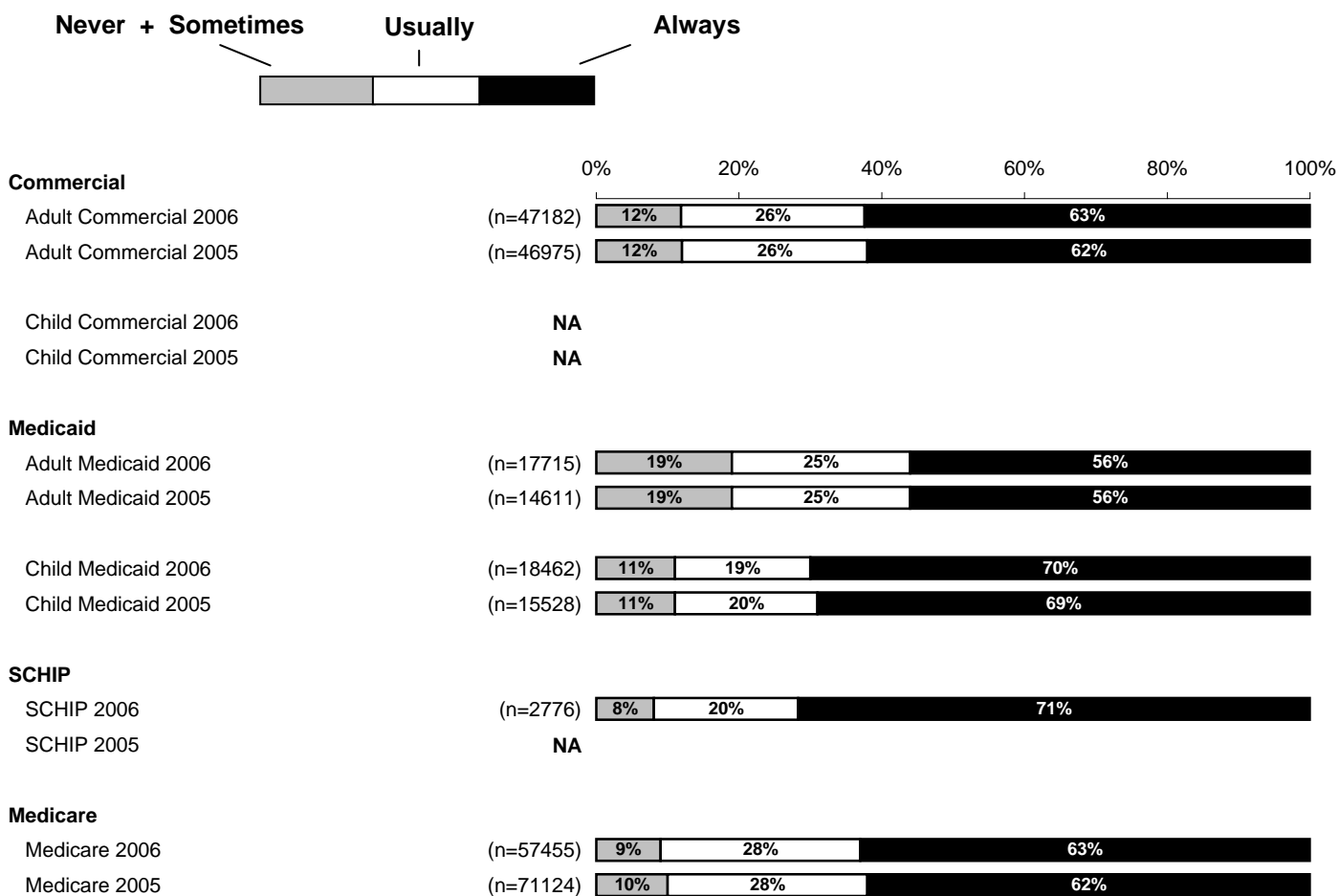
NOTE: Response distributions may not sum to 100 percent due to rounding.

When consumers called during regular office hours, how often did they get the help or advice they needed.



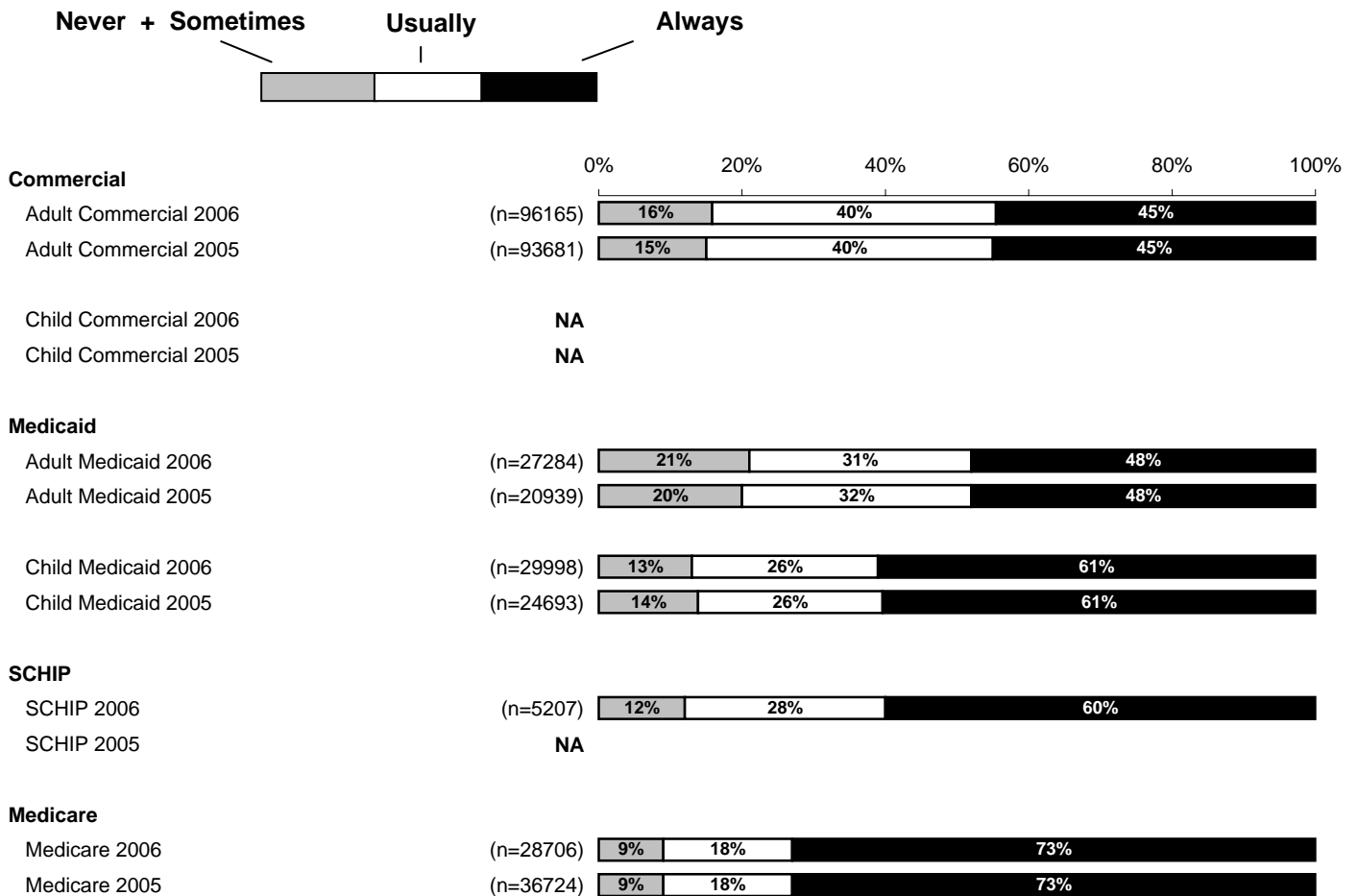
NOTE: Response distributions may not sum to 100 percent due to rounding.

When consumers needed care right away for an illness, injury, or condition, how often did they get care as soon as they wanted.

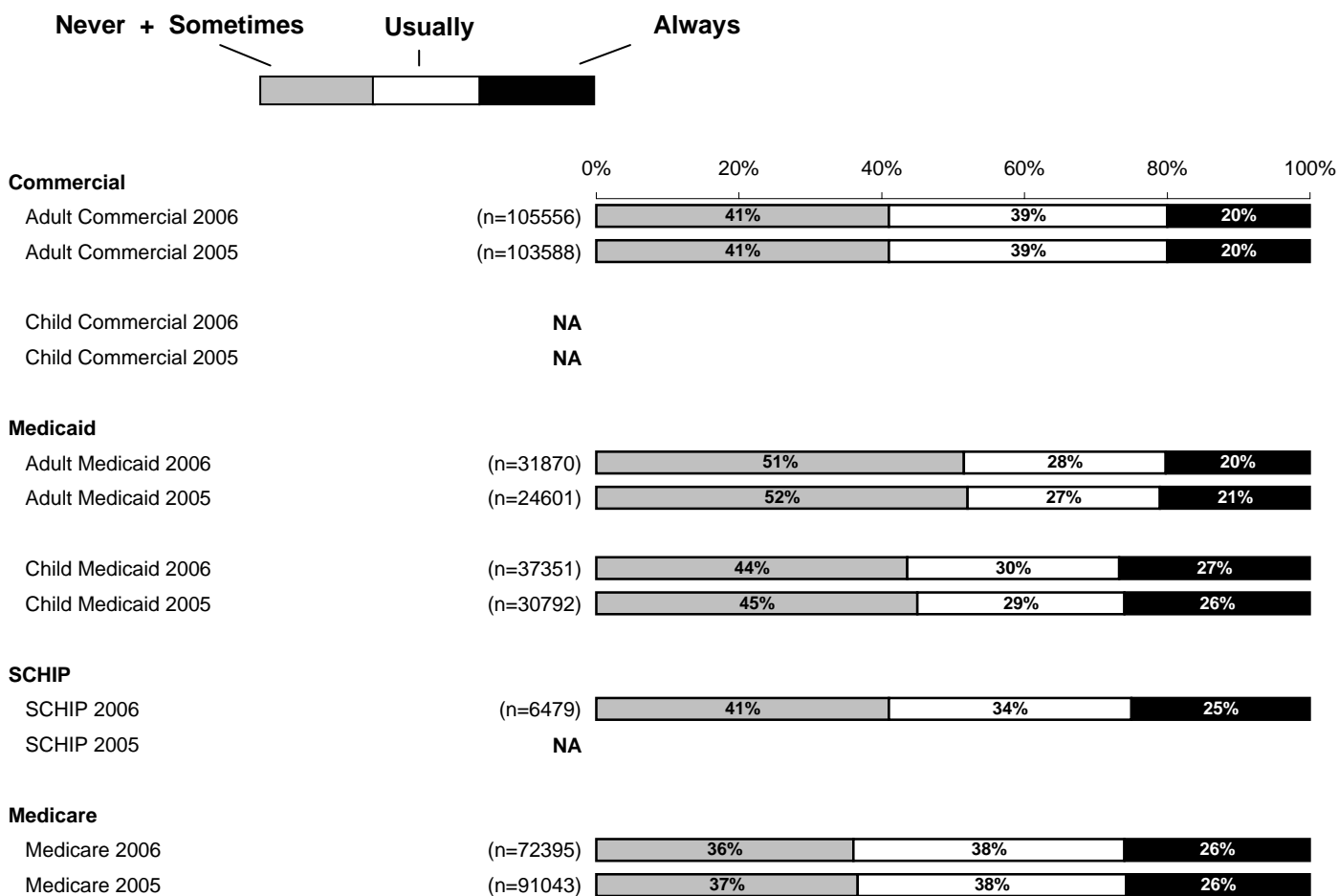


NOTE: Response distributions may not sum to 100 percent due to rounding.

Not counting times consumers needed health care right away, how often did they get an appointment for health care as soon as they wanted.



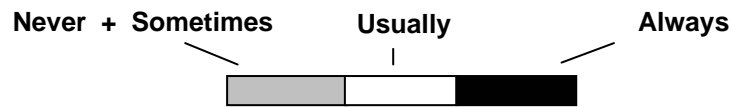
NOTE: Response distributions may not sum to 100 percent due to rounding.

How often were consumers taken to the exam room within 15 minutes of their appointment.

NOTE: Response distributions may not sum to 100 percent due to rounding.

Doctors Who Communicate Well

Combines responses from five questions regarding how often doctors communicated well with consumers.



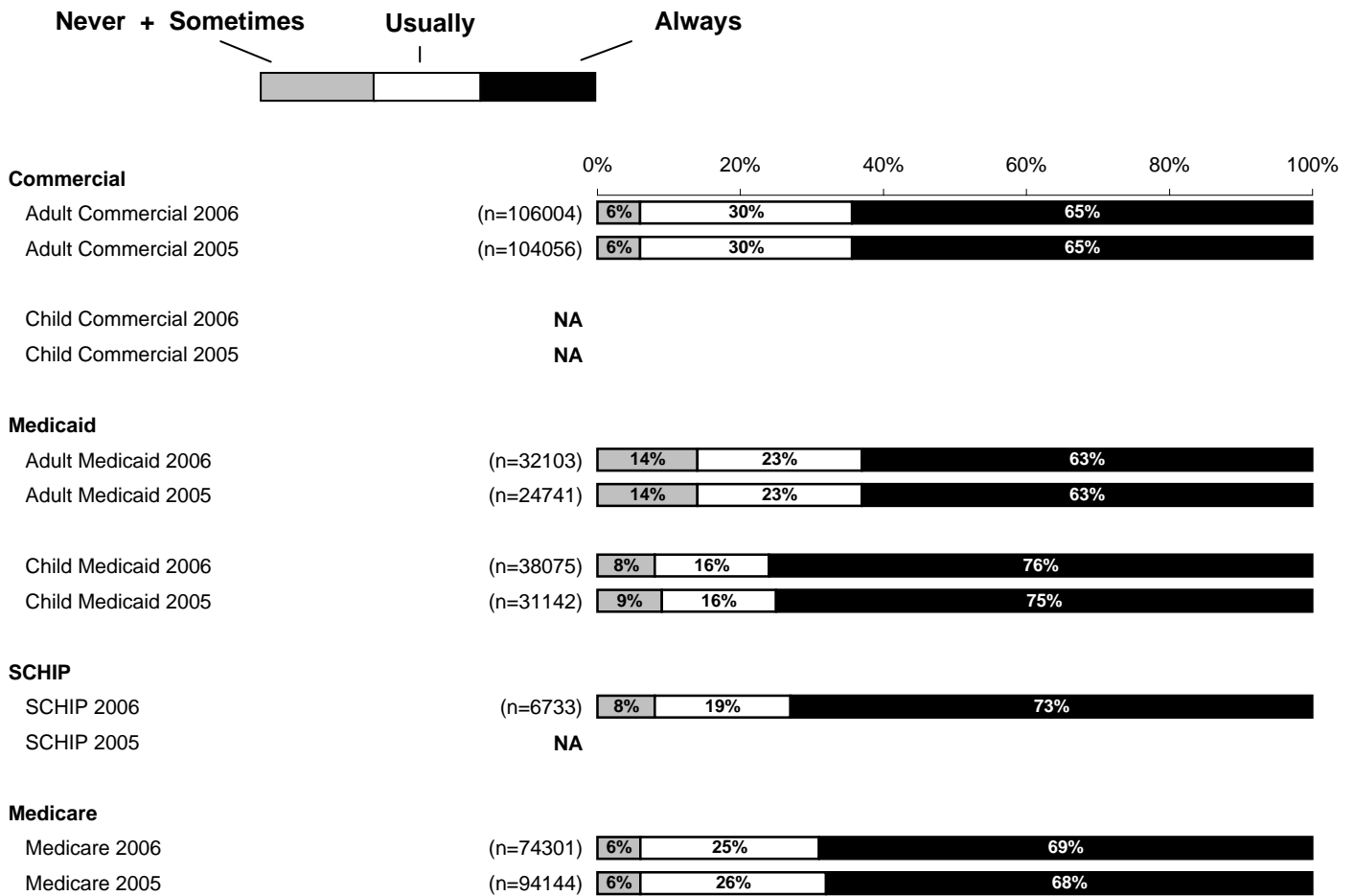
NOTE: Response distributions may not sum to 100 percent due to rounding.

How often did doctors or other health providers listen carefully to consumers.



NOTE: Response distributions may not sum to 100 percent due to rounding.

How often did doctors or other health providers explain things in a way adults could understand.



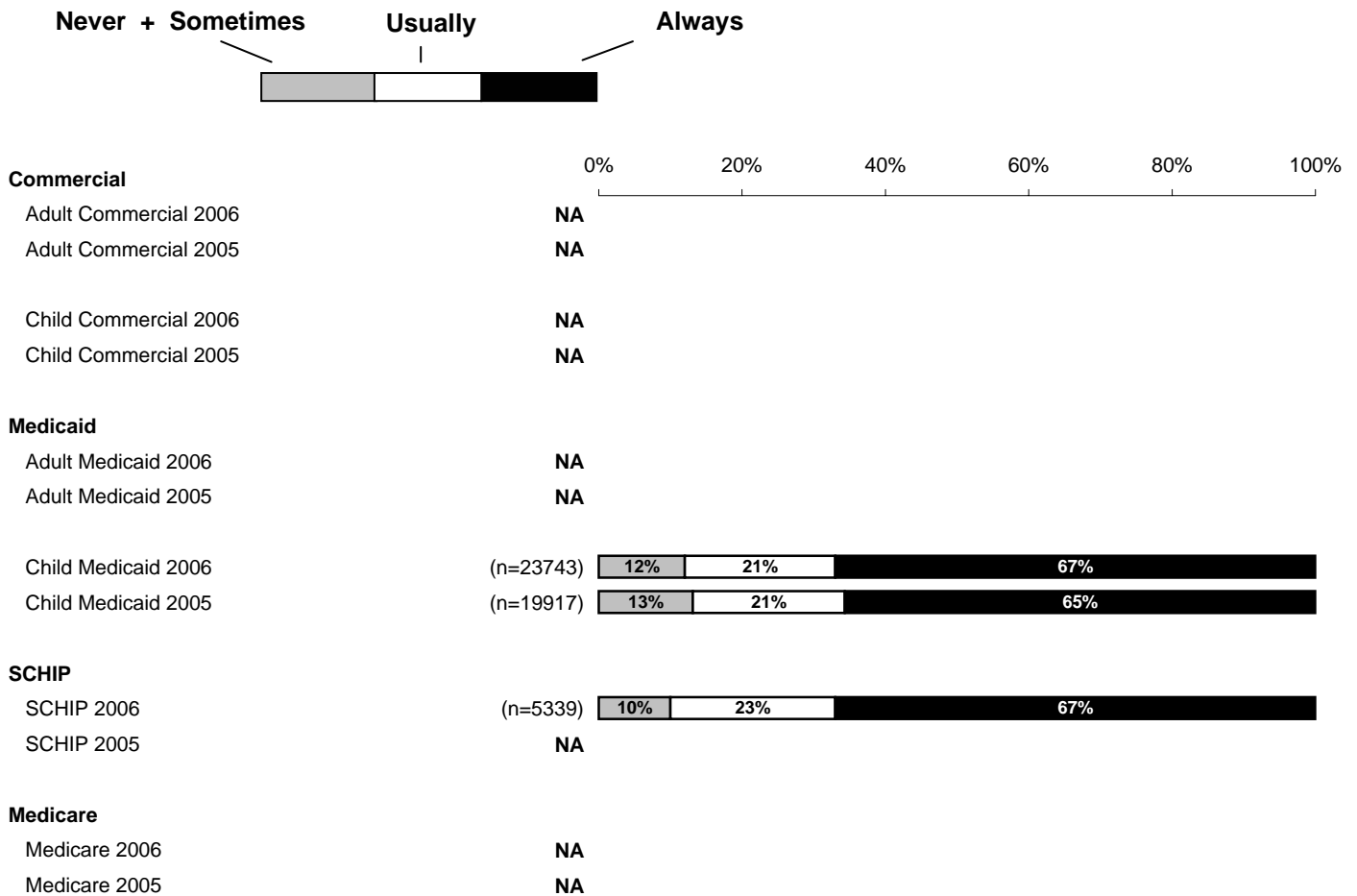
NOTE: Response distributions may not sum to 100 percent due to rounding.

How often did doctors or other health providers show respect for what consumers had to say.



NOTE: Response distributions may not sum to 100 percent due to rounding.

How often did doctors or other health providers explain things in a way a child could understand.



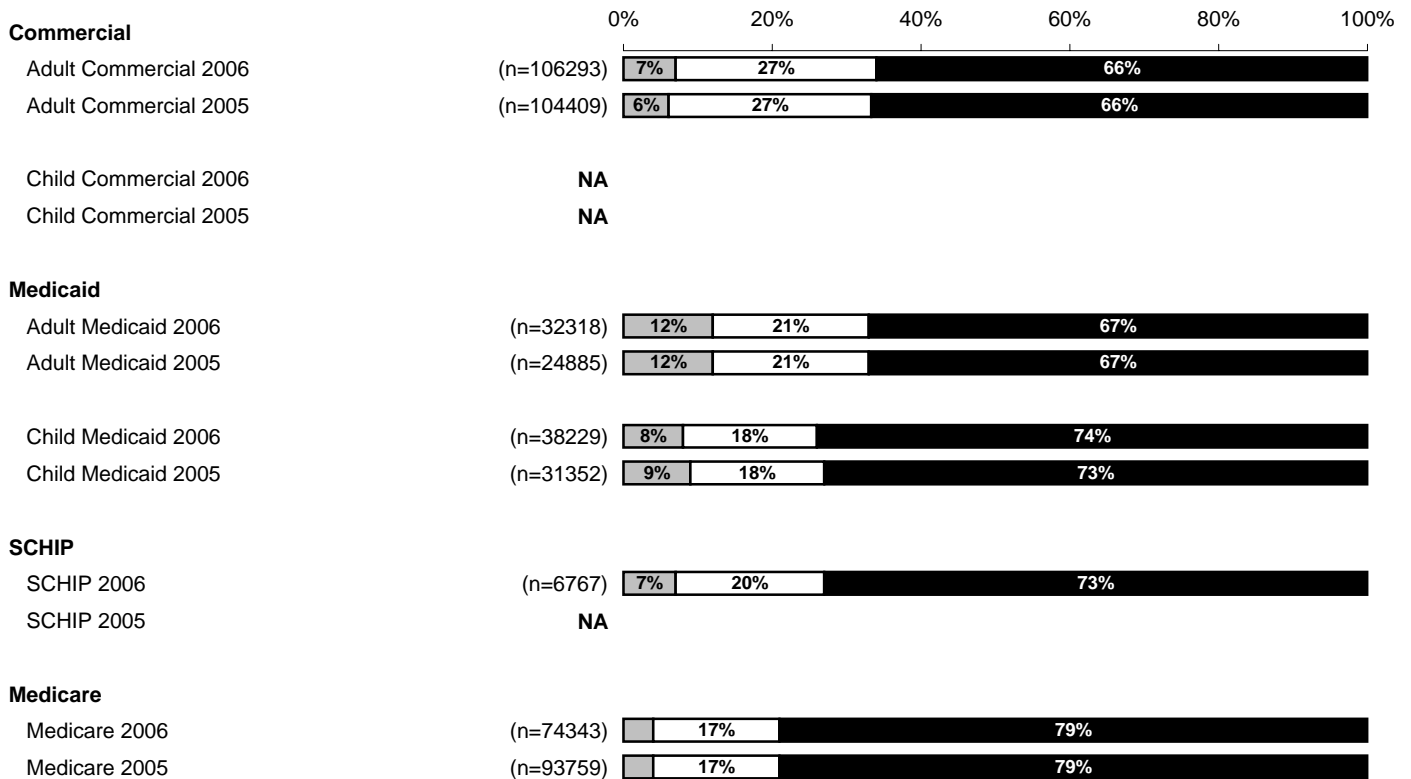
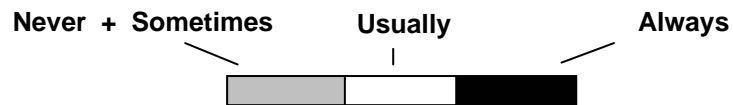
NOTE: Response distributions may not sum to 100 percent due to rounding.

How often did doctors or other health providers spend enough time with consumers.

NOTE: Response distributions may not sum to 100 percent due to rounding.

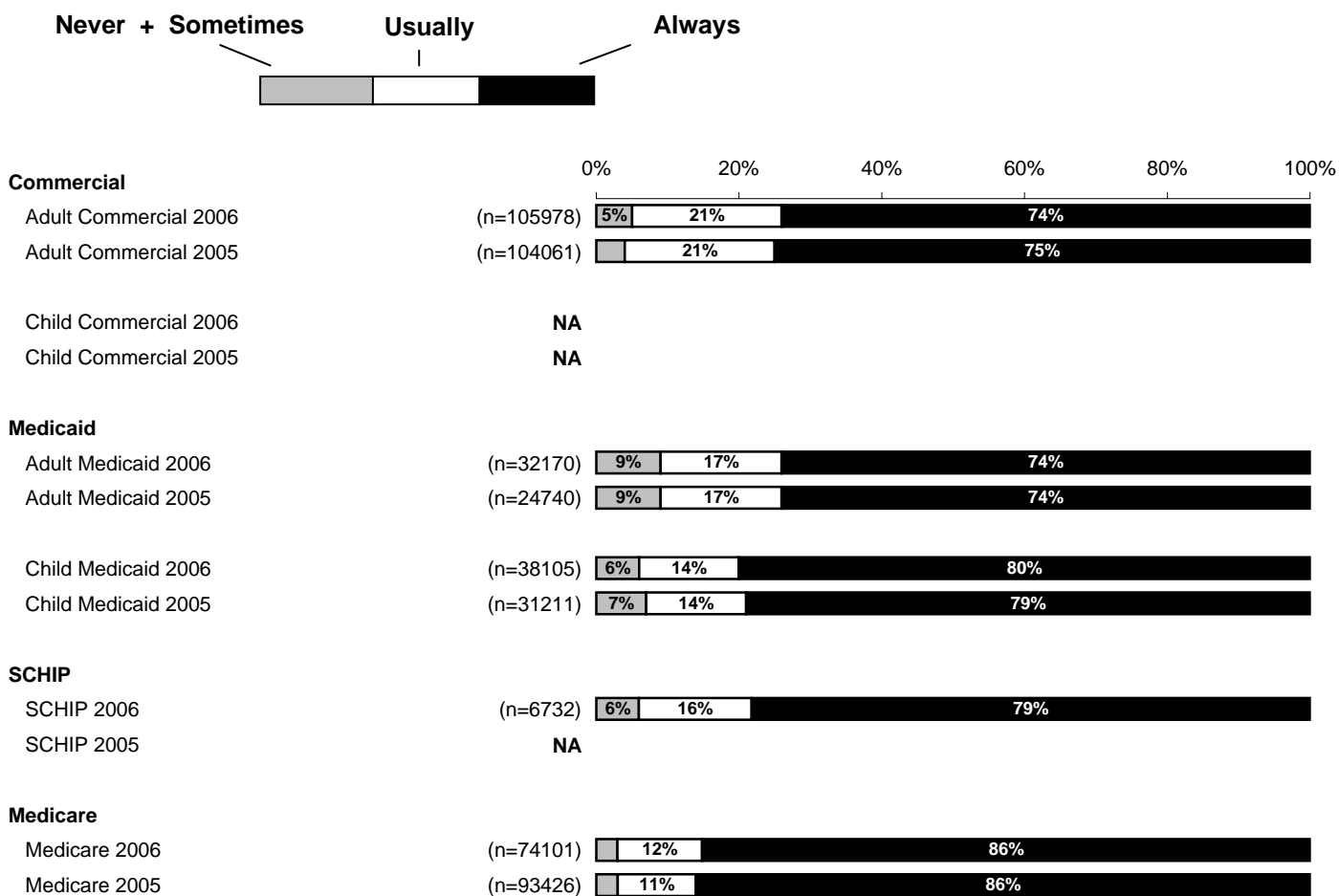
Courteous and Helpful Office Staff

Combines responses from two questions regarding how often office staff were courteous and helpful.



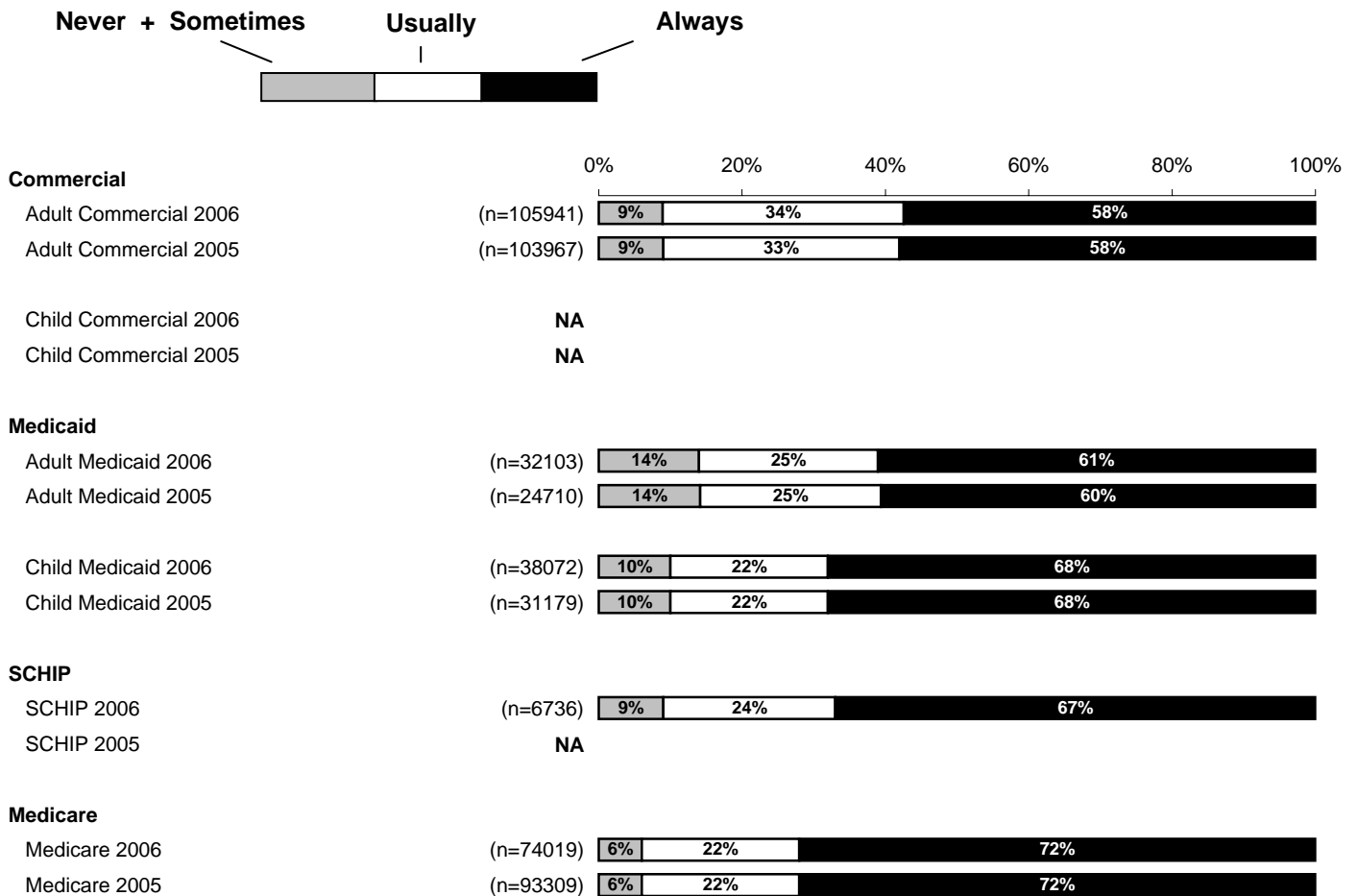
NOTE: Response distributions may not sum to 100 percent due to rounding.

How often did office staff at a doctor's office or clinic treat consumers with courtesy and respect.



NOTE: Response distributions may not sum to 100 percent due to rounding.

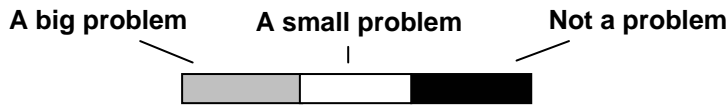
How often were office staff at a doctor's office or clinic as helpful as consumers thought they should be.



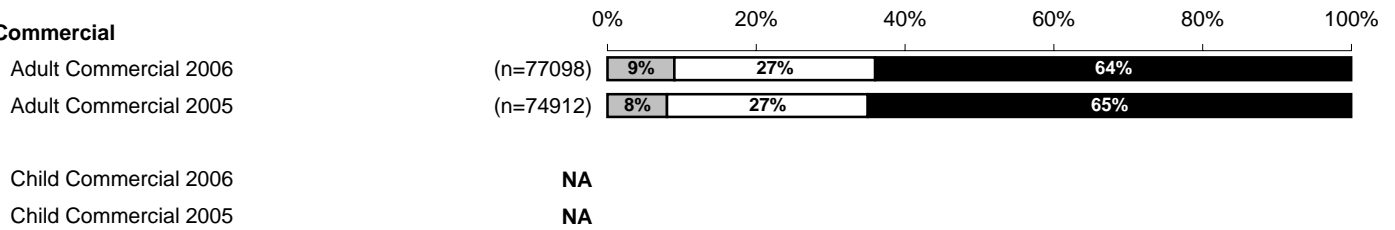
NOTE: Response distributions may not sum to 100 percent due to rounding.

Customer Service

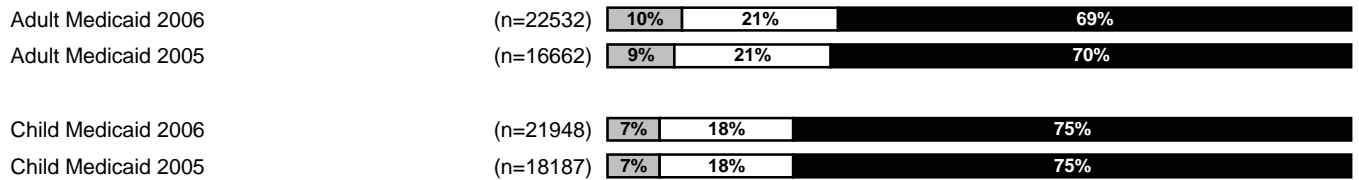
Combines responses from three questions about getting needed information and help from your health plan.



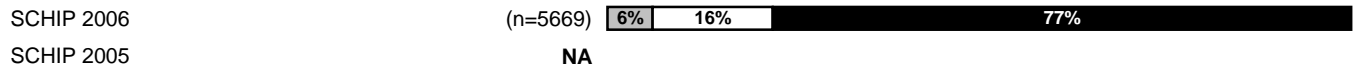
Commercial



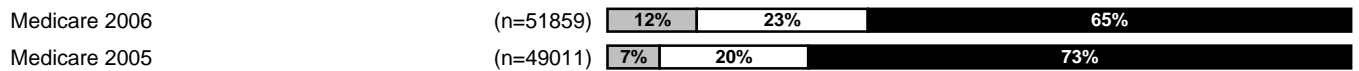
Medicaid



SCHIP

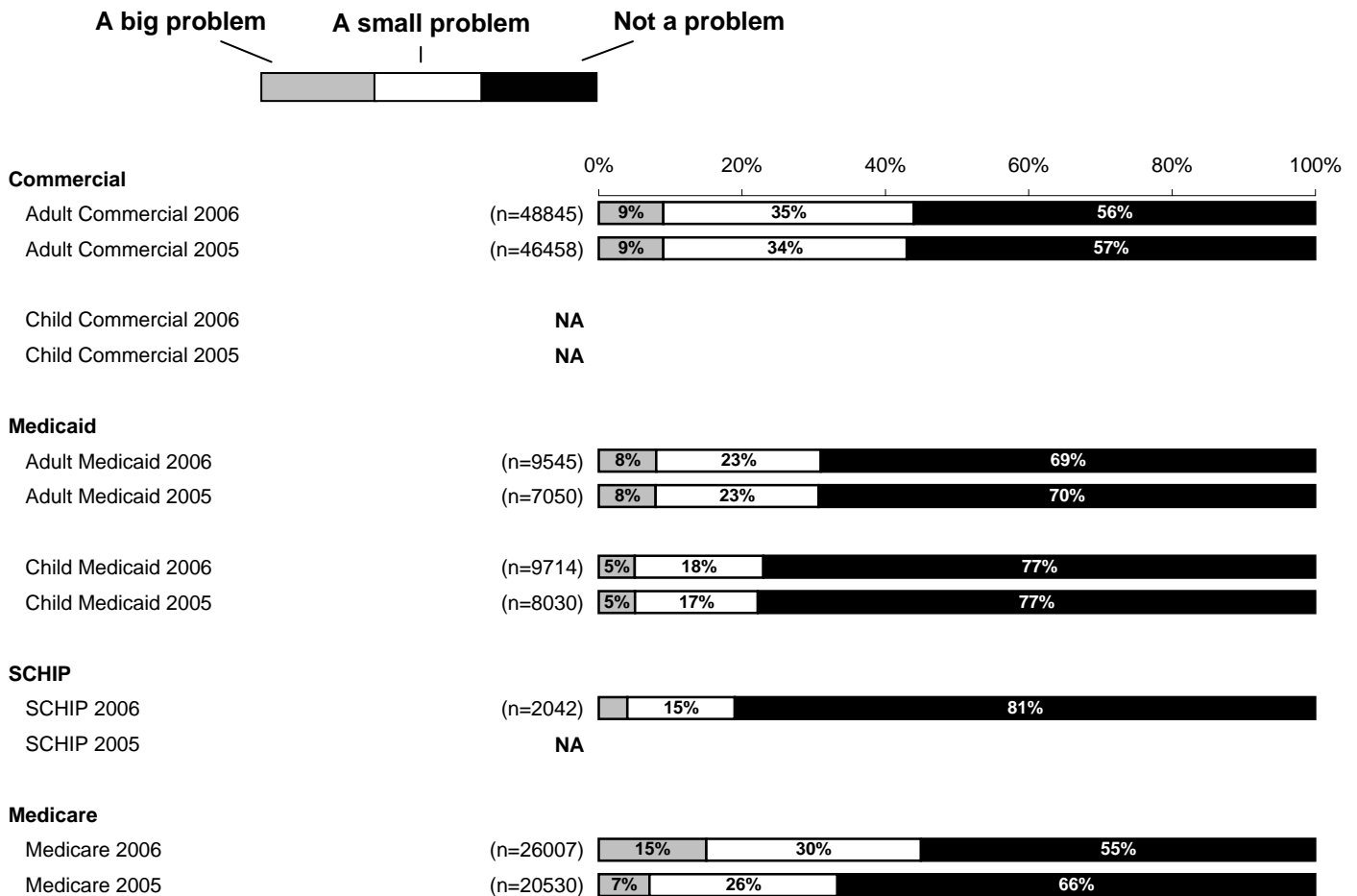


Medicare



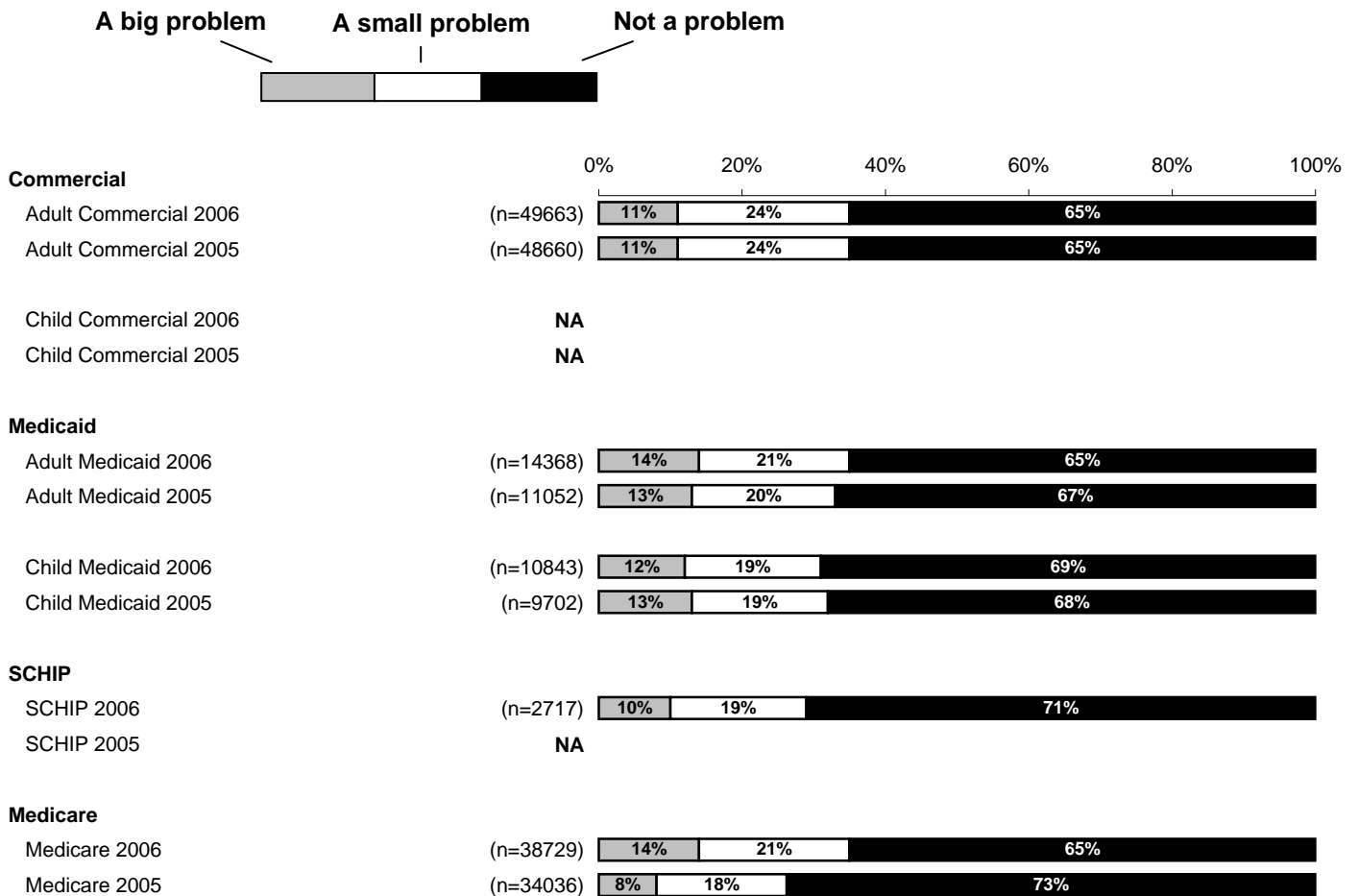
NOTE: Response distributions may not sum to 100 percent due to rounding.

How much of a problem, if any, was it to find or understand information.



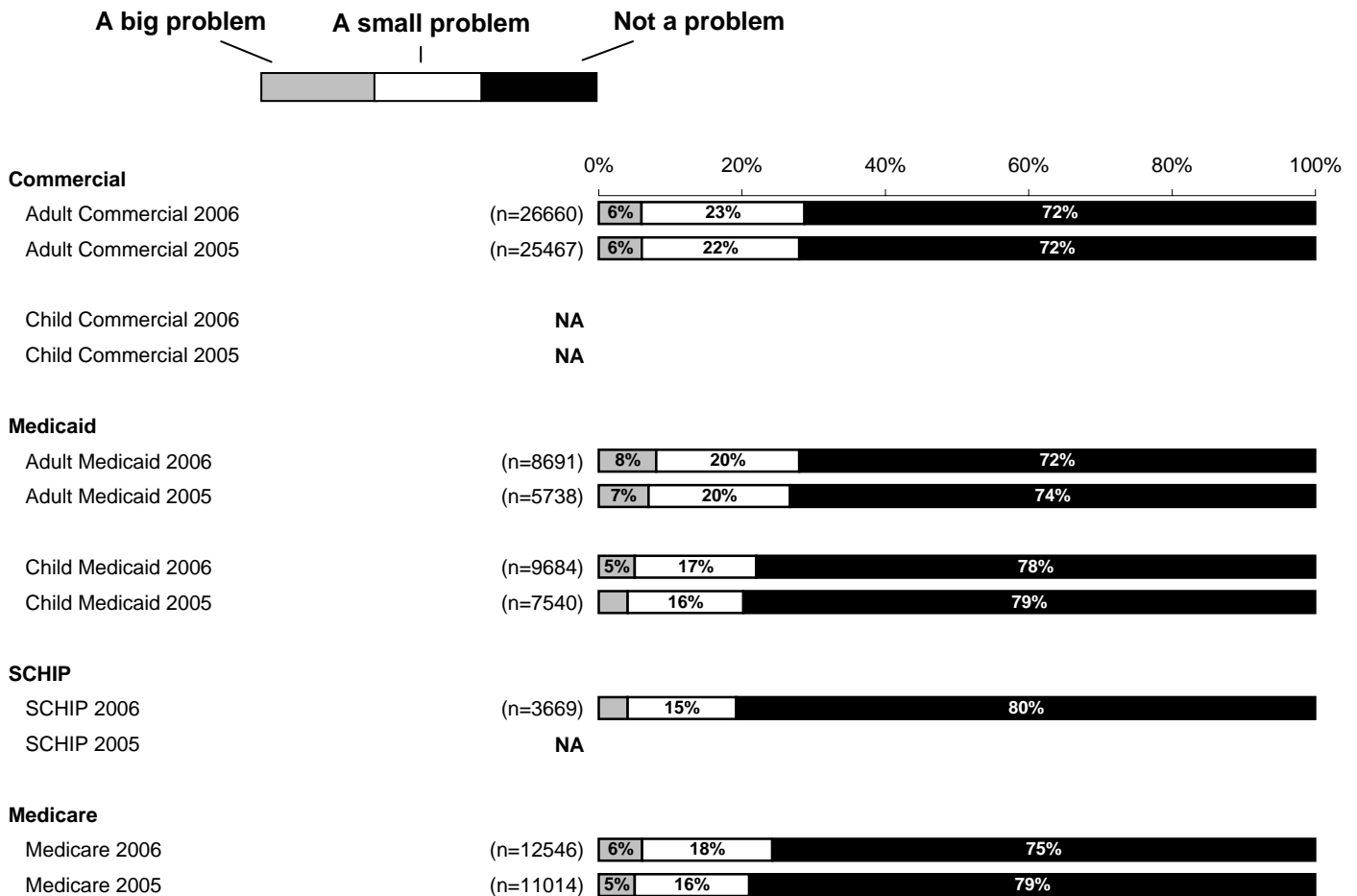
NOTE: Response distributions may not sum to 100 percent due to rounding.

How much of a problem, if any, was it to get the help consumers needed when they called their health plan's customer service.



NOTE: Response distributions may not sum to 100 percent due to rounding.

How much of a problem, if any, did consumers have with paperwork for their health plan.



NOTE: Response distributions may not sum to 100 percent due to rounding.

Results for Rating Questions

The CAHPS Health Plan Survey includes four rating questions designed to distinguish among important aspects of care. The four questions ask plan enrollees to rate their experiences in the past 12 months (if commercial and Medicare plan enrollees) or 6 months (if Medicaid and SCHIP plan enrollees) with:

- their personal doctor or nurse;
- the specialist they saw most often;
- health care received from all doctors and other health providers; and
- their health plan.

Ratings are scored from 0 to 10, where 0 is the “worst possible” and 10 is the “best possible.”

The following charts show the distribution of CAHPS Health Plan Survey scores across the four sectors for each of the four ratings.³ A minimum number of 10 plan samples are required to generate results. An “NA” appears for the 2006 Child Commercial results because less than 10 plan samples were submitted to the CAHPS Database.

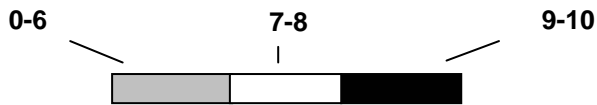
Supporting Information in the Appendix

Appendix D lays out the individual survey items and response options that make up each of the composites, as well as the wording and response options for each of the rating questions.

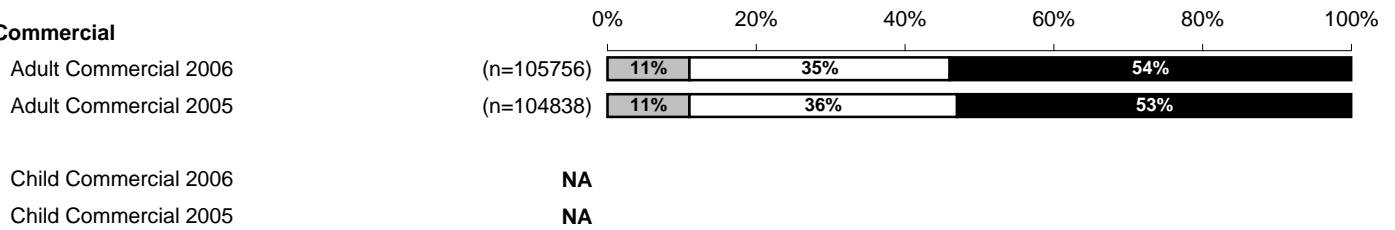
³ The Medicare Managed Care Survey results presented in these charts may differ from other reports due to the inclusion or exclusion of special beneficiary sub-populations and/or the use of case-mix adjustment variables. These results, as well as those presented elsewhere, originate from the same source – CMS’s annual survey of Medicare beneficiaries enrolled in managed care health plans.

Overall Rating of Personal Doctor

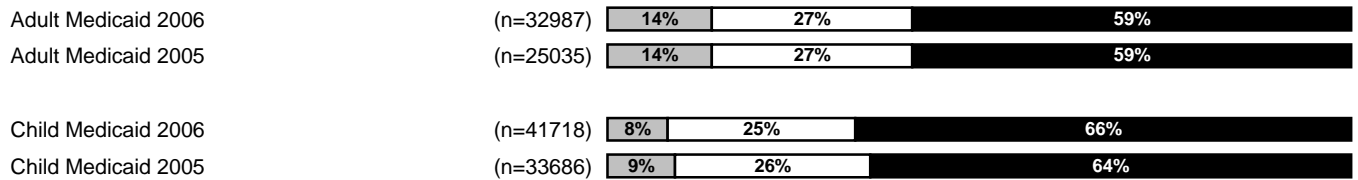
Using 0 to 10 where 0 is the worst possible and 10 is the best possible, how would you rate your personal doctor or nurse?



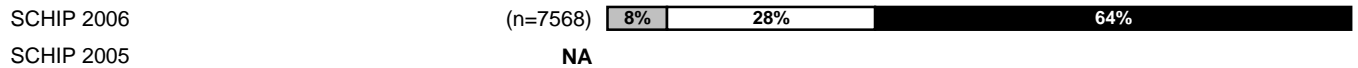
Commercial



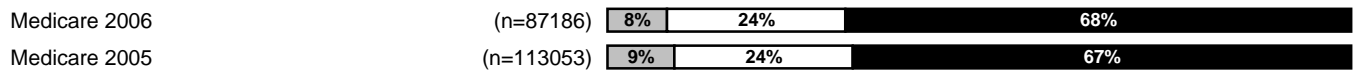
Medicaid



SCHIP



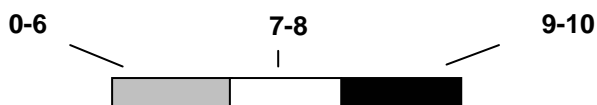
Medicare



NOTE: Response distributions may not sum to 100 percent due to rounding.

Overall Rating of Specialists

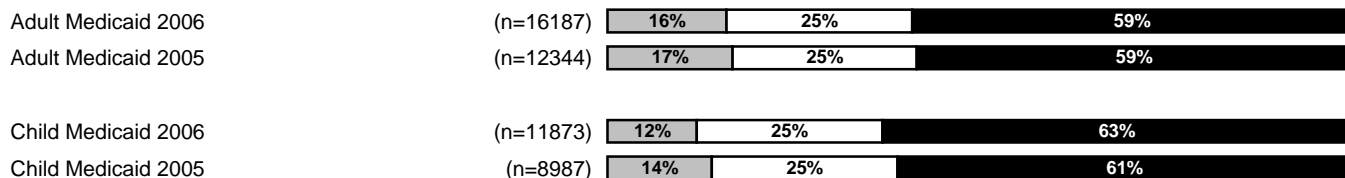
Using 0 to 10 where 0 is the worst possible and 10 is the best possible, how would you rate your specialist?



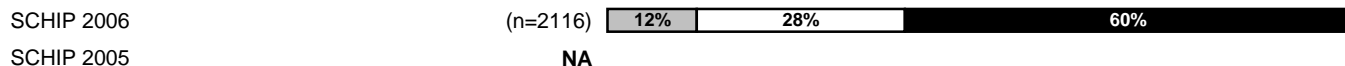
Commercial



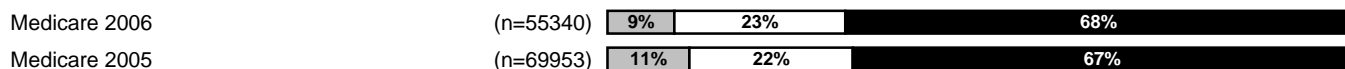
Medicaid



SCHIP



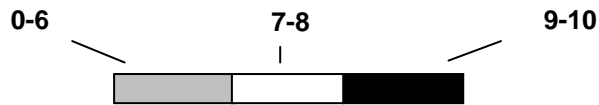
Medicare



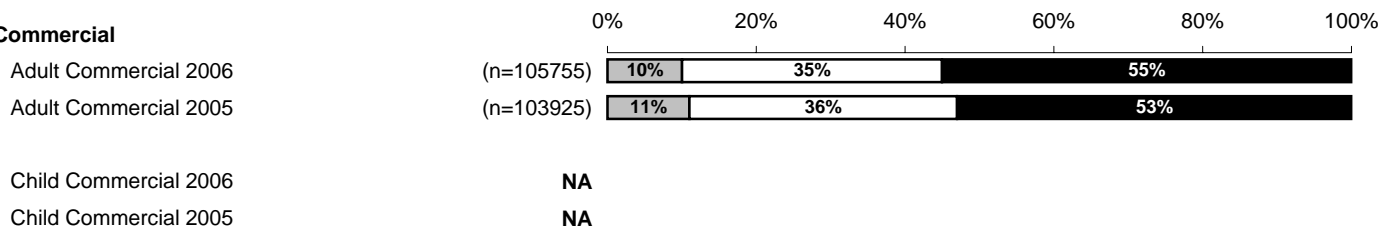
NOTE: Response distributions may not sum to 100 percent due to rounding.

Overall Rating of Health Care

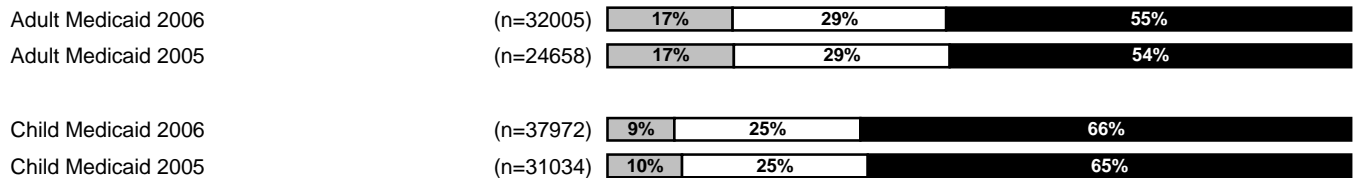
Using 0 to 10 where 0 is the worst possible and 10 is the best possible, how would you rate all your health care?



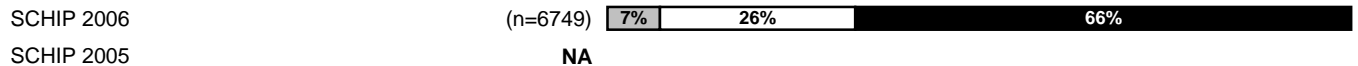
Commercial



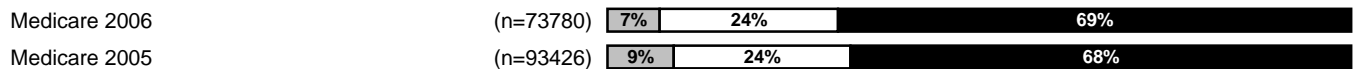
Medicaid



SCHIP



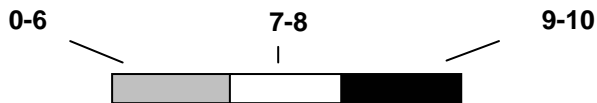
Medicare



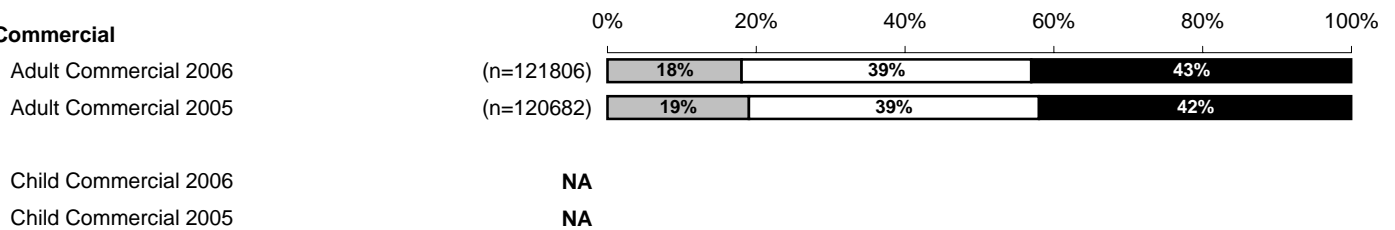
NOTE: Response distributions may not sum to 100 percent due to rounding.

Overall Rating of Health Plan

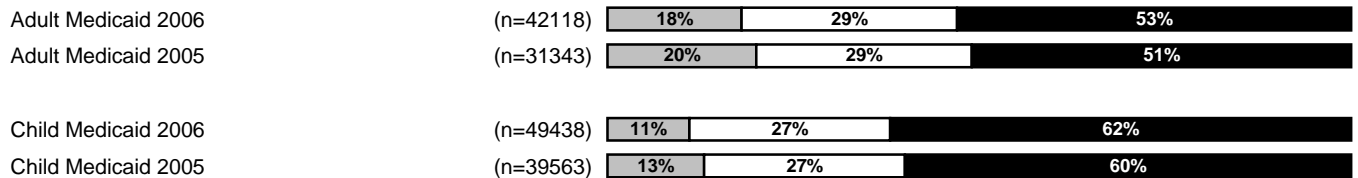
Using 0 to 10 where 0 is the worst possible and 10 is the best possible, how would you rate your health plan?



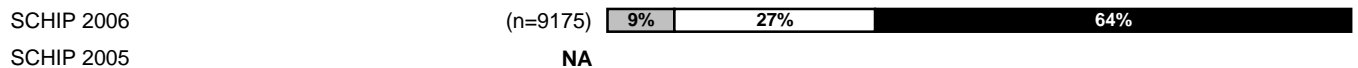
Commercial



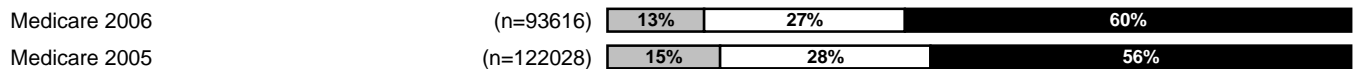
Medicaid



SCHIP



Medicare



NOTE: Response distributions may not sum to 100 percent due to rounding.

Appendix A: A Brief Overview of CAHPS

CAHPS refers to a family of survey instruments and reporting tools designed to measure important dimensions of health care performance from the consumer's point of view. The program to develop these surveys is sponsored by AHRQ, which is an agency of the U.S. Department of Health and Human Services.

The CAHPS Health Plan Survey was developed for use with all types of health insurance enrollees (commercial, Medicaid, SCHIP, and Medicare) and across the full range of health care delivery systems – from fee-for-service to managed care plans. Versions are available for adults reporting on their own experiences as well as for parents or guardians reporting on the experiences of their children. Supplemental questions may be added to meet the individual needs of users. For example, there are supplemental items for collecting data on the experiences of adults with chronic conditions.

The CAHPS Team is currently developing and testing surveys on patient's experiences with other provider systems and facilities, including:

- CAHPS Clinician & Group Survey
- CAHPS Hospital Survey
- CAHPS Nursing Home Surveys
- CAHPS People With Mobility Impairments Survey
- CAHPS In-Center Hemodialysis Survey
- CAHPS American Indian Survey
- ECHO (the CAHPS behavioral health survey)

Revisions also have been made to the CAHPS Health Plan Survey, which will result in the transition from the 3.0 to the 4.0 version in 2007.

The **CAHPS Health Plan Survey and Reporting Kit** provides users with all the tools required to conduct the survey, analyze the data, and report the results. This Kit and further information on products and resources are available through the CAHPS Web site: https://www.cahps.ahrq.gov/content/ncbd/ncbd_Intro.asp?p=105&s=5. Additionally, you can contact the CAHPS User Network at cahps1@ahrq.gov or by phone at 1-800-492-9261 with questions and comments.

Appendix B: About the National CAHPS Benchmarking Database

The National CAHPS Benchmarking Database (the CAHPS Database) is the national repository for data from the CAHPS family of surveys. The primary purpose of the CAHPS Database is to facilitate comparisons of CAHPS survey results by and among survey sponsors. This compilation of survey results from a large pool of sponsors into a single national database enables participants to compare their own results to relevant benchmarks (i.e., reference points such as national and regional averages). The CAHPS Database also offers an important source of primary data for research related to consumer assessments of quality as measured by CAHPS surveys.

The CAHPS Database currently contains 9 years of data from the CAHPS Health Plan Survey. The 2006 database holds survey results for approximately 327,000 adults and children enrolled in commercial, Medicaid, SCHIP, and Medicare plans. Major products supporting benchmarking and research related to the CAHPS Health Plan Survey include:

- **Sponsor Reports:** Each fall, participating commercial, Medicaid, and SCHIP sponsors receive a free, customized report comparing their results to appropriate national benchmarks including national and regional distributions.
- **Annual Chartbook:** This report, published each fall, presents cross-sector comparisons of CAHPS Health Plan Survey results for commercial (adult and child), Medicaid (adult and child), SCHIP (child), and Medicare (adult) populations.
- **Research Files:** The CAHPS Database aggregates respondent-level data files across sponsors and health plans for the commercial, Medicaid, and SCHIP populations. Researchers may gain authorized access to data needed to help answer important health services research questions related to consumer assessments of quality.

In addition to data from the CAHPS Health Plan Survey, the CAHPS Database has developed a component for the CAHPS Hospital Survey (H-CAHPS) and is currently developing plans for a national database to support the CAHPS Clinician/Group Survey. The CAHPS Database will continue to expand as the number and variety of CAHPS survey instruments grows.

The CAHPS Database is sponsored by AHRQ and administered by Westat and Shaller Consulting. A formal Advisory Group composed of representatives from survey sponsor organizations and other groups with an interest in the database provides oversight and direction.

Further information about the CAHPS Database is available at:
https://www.cahps.ahrq.gov/content/ncbd/ncbd_Intro.asp?p=105&s=5

Appendix C: Composition of the CAHPS Health Plan Survey Database: 1998-2006

The National CAHPS Benchmarking Database currently contains nine years of data from the CAHPS Health Plan Survey. The following table shows data submissions to the CAHPS Database from 1998 to 2006. The total number of respondents is presented by population sector, with the number of health plan samples given in parentheses.

| Year (CAHPS Version) | Commercial | | Medicaid | | SCHIP | Medicare |
|---------------------------------|-------------------|-----------------|-----------------|-----------------|----------------|------------------|
| | Adult | Child | Adult | Child | Child | Adult |
| 2006 (3.0) | 124,585 (271) | 2,400 (7) | 43,174 (119) | 50,204 (95) | 9,303 (30) | 97,955 (273) |
| 2005 (3.0) | 123,272 (254) | 2,661 (4) | 32,115 (76) | 40,204 (65) | 1,252 (3) | 127,930 (276) |
| 2004 (3.0) | 111,680 (223) | 7,024 (12) | 59,515 (149) | 86,159 (128) | 16,657 (29) | 132,420 (288) |
| 2003 (3.0) | 114,063 (216) | 1,866 (4) | 39,275 (112) | 31,081 (69) | 19,061 (49) | 141,421 (295) |
| 2002 (2.0) | 94,546 (219) | 5,600 (10) | 48,109 (136) | 60,534 (122) | 18,910 (43) | 153,172 (321) |
| 2001 (2.0) | 165,500 (266) | 9,913 (24) | 45,127 (142) | 36,940 (124) | 0 (0) | 179,451 (381) |
| 2000 (2.0) | 135,479 (270) | 2,760 (8) | 49,327 (156) | 41,400 (140) | 0 (0) | 166,072 (367) |
| 1999 (2.0) | 168,234 (307) | 42,879 (149) | 28,420 (77) | 14,106 (66) | 0 (0) | 0 (0) |
| 1998 (1.0) | 34,965 (54) | 0 (0) | 23,519 (31) | 9,871 (33) | 0 (0) | 0 (0) |
| TOTALS | 1,072,324 | 75,103 | 368,581 | 370,499 | 65,183 | 998,421 |

In addition to data from the CAHPS Health Plan Survey, the CAHPS Database has developed a component for the CAHPS Hospital Survey (H-CAHPS) and is currently developing plans for a national database to support the CAHPS Clinician/Group Survey. The CAHPS Database will continue to expand as the number and variety of CAHPS survey instruments grows.

Appendix D: Definition of Reporting Composites and Ratings

The tables on the following pages present the individual items and responses for each of the CAHPS Health Plan Survey's reporting composites and ratings.

- Table 1 presents the individual items in each of the five reporting composites.
- Table 2 presents the question wording for each of the four rating questions.

Table 1. Items in the CAHPS Health Plan Survey 3.0 Reporting Composites

| Reporting Composites and Items | Response Groupings for Presentation |
|---|---|
| Getting Needed Care | |
| • Since you joined your (child's) health plan, how much of a problem, if any, was it to get a personal doctor or nurse you are happy with? | A big problem, A small problem, Not a problem |
| • In the last...months, how much of a problem, if any, was it to see a specialist that you (your child) needed to see? | A big problem, A small problem, Not a problem |
| • In the last...months, how much of a problem, if any, was it to get the care, tests, or treatment (for your child) you or a doctor believed necessary? | A big problem, A small problem, Not a problem |
| • In the last...months, how much of a problem, if any, were delays in (your child's) health care while you waited for approval from your (child's) plan? | A big problem, A small problem, Not a problem |
| Getting Care Quickly | |
| • In the last...months, when you called during regular office hours, how often did you get the help or advice you needed (for your child)? | Never + Sometimes, Usually, Always |
| • In the last...months, not counting times you (your child) needed health care right away, how often did you (your child) get an appointment for health care as soon as you wanted? | Never + Sometimes, Usually, Always |
| • In the last...months, when you (your child) needed care right away for an illness, injury, or condition, how often did you (your child) get care as soon as you wanted? | Never + Sometimes, Usually, Always |
| • In the last...months, how often were you (your child) taken to the exam room within 15 minutes of your (your child's) appointment? | Never + Sometimes, Usually, Always |
| Doctors Who Communicate Well | |
| • In the last...months, how often did (your child's) doctors or other health providers listen carefully to you? | Never + Sometimes, Usually, Always |
| • In the last...months, how often did (your child's) doctors or other health providers explain things in a way you could understand? | Never + Sometimes, Usually, Always |
| • In the last...months, how often did (your child's) doctors or other health providers show respect for what you had to say? | Never + Sometimes, Usually, Always |
| • In the last...months, how often did (your child's) doctors or other health providers explain things in a way a child could understand? | Never + Sometimes, Usually, Always |
| • In the last...months, how often did doctors or other health providers spend enough time with you (your child)? | Never + Sometimes, Usually, Always |

| | |
|--|---|
| Courteous and Helpful Office Staff | |
| <ul style="list-style-type: none"> In the last...months, how often did office staff at a (your child's) doctor's office or clinic treat you (and your child) with courtesy and respect? | Never + Sometimes, Usually, Always |
| <ul style="list-style-type: none"> In the last...months, how often were office staff at a (your child's) doctor's office or clinic as helpful as you thought they should be? | Never + Sometimes, Usually, Always |
| Health Plan Customer Service | |
| <ul style="list-style-type: none"> [Screener]: In the last...months, did you look for any information about how your (your child's) health plan works in written material or on the Internet? [yes, no] | |
| <ul style="list-style-type: none"> In the last...months, how much of a problem, if any, was it to find or understand this information? | A big problem, A small problem, Not a problem |
| <ul style="list-style-type: none"> In the last...months, how much of a problem, if any, was it to get the help you needed when you called your (child's) health plan's customer service? | A big problem, A small problem, Not a problem |
| <ul style="list-style-type: none"> In the last...months, how much of a problem, if any, did you have with paperwork for your (child's) health plan? | A big problem, A small problem, Not a problem |

Table 2. Rating Items in the CAHPS 3.0 Health Plan Survey

| Rating Items | Response Grouping for Presentation |
|--|------------------------------------|
| Rating of Personal Doctors | |
| <ul style="list-style-type: none"> Use any number on a scale from 0 to 10 where 0 is the worst personal doctor or nurse possible, and 10 is the best personal doctor or nurse possible. How would you rate your (child's) personal doctor or nurse now? | 0-6, 7-8, 9-10 |
| Rating of Specialists | |
| <ul style="list-style-type: none"> Use any number on a scale from 0 to 10 where 0 is the worst specialist possible, and 10 is the best specialist possible. How would you rate the (your child's) specialist? | 0-6, 7-8, 9-10 |
| Rating of Health Care | |
| <ul style="list-style-type: none"> Use any number on a scale from 0 to 10 where 0 is the worst health care possible, and 10 is the best health care possible. How would you rate all your (child's) health care? | 0-6, 7-8, 9-10 |
| Rating of Health Plan | |
| <ul style="list-style-type: none"> Use any number on a scale from 0 to 10 where 0 is the worst health plan possible, and 10 is the best health plan possible. How would you rate your (child's) health plan now? | 0-6, 7-8, 9-10 |

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